THE SATURDAY EVE[illegible] POST

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May/June '93 $2.50

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Medical Mystery: Guillain-Barré Syndrome

Rush Limbaugh

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and up on the hillside
as often she does
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and made biscuits for tea,
but still was as blue
as a bunny can be
She sat in her rocker
and knitted a sweater,
but not even that
uld make her feel better
n she thought to herself
f just the right way
lift her sad spirit,
knelt down to pray

Maggie & Friends

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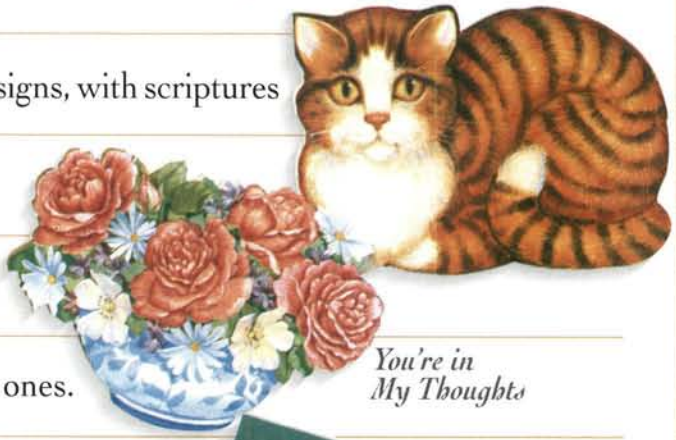

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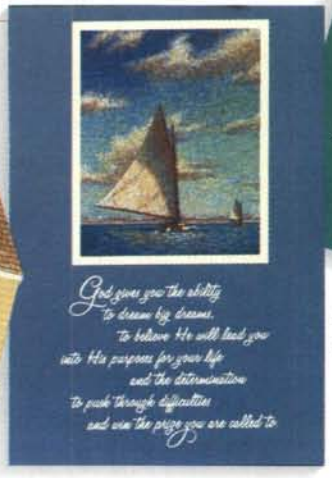
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APR 20 1993

by Lee Teter

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Making A Difference—is the mission of Harry Smith, co-anchor of "CBS This Morning." **40**

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(Cover photo by Tony Esparza/CBS)

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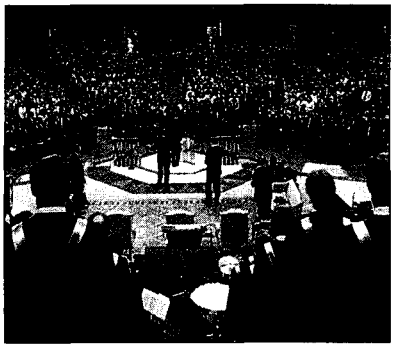

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The Lowly Potato—heart experts agree is a powerhouse of low-calorie nutrition. **18**

Touring America—through the paintings of Hall-of-Fame illustrator John Clymer. **58**

Letters

Disgusted with Donahue

I, like others, was saddened to see you had included Phil Donahue in the "Post People" in the Jan./Feb. 1993 issue.

I'm sorry to say I will not be renewing my subscription to *The Saturday Evening Post.*

Nathalie Penson
Sheridan, Wyoming

I'm truly sorry that some people choose to poison their minds with trash, but because we can't legislate against it, we should keep in mind that it isn't required viewing. Sponsors: take note.

Howard Olmsted
Roanoke, Virginia

Just to be disgusted and shut it off is not enough. Our children and grandchildren are touched by the lives of those who watch, digest, and are influenced by the filth they see and hear from Donahue.

Juanita Showman
Ottawa, Ohio

Editor's Note: Not having watched Phil Donahue's show for nearly 20 years, we really didn't know it had come to the current low state that so many of our concerned readers have described in an avalanche of letters. If this deluge of responses were directed to the advertising sponsors of his program, Donahue would be pressured into cleaning up his act in a hurry. This isn't the same Phil Donahue we knew in Chicago years ago.

Some Things Never Change

Upon turning to page 50 of the March/April '93 issue, I thought I was looking at a vivid memory of my husband and me from 42 years ago. The layout of the bedroom and the placement of the baby crib where our son slept was exactly the same as ours. The situation was exactly the same. He was awake and was willing to just lie there and play, *as long as we didn't move!* We would wink at each other or nudge each other under the covers to send a message between us that as long as we lay very still, we could get a few extra winks of sleep—as long as he didn't know we were awake! I am sure there are many who remembered doing this as young

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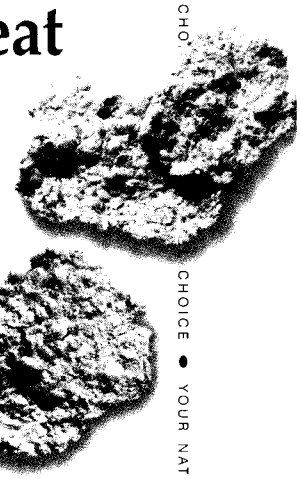

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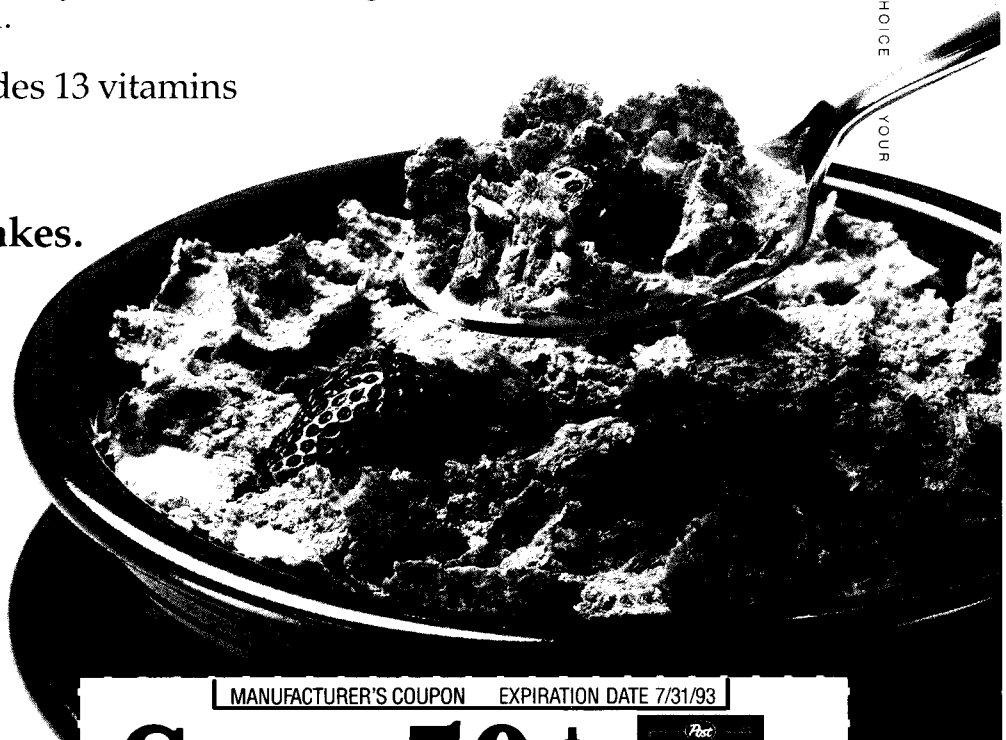

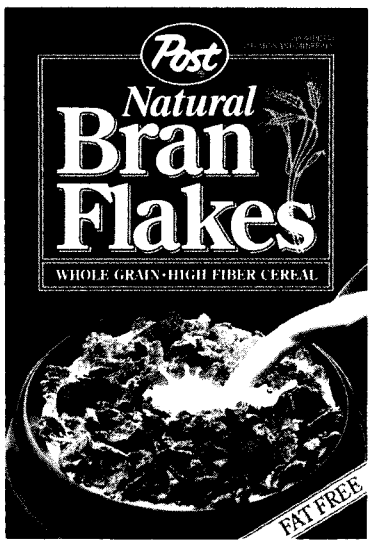

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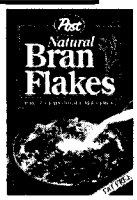

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parents, and there are just as many today. Wonderful!

The *Post* is a must in our household. We have been going through our subscription list to see what we can cut down on, as we can't keep up with our reading, but the *Post* is not on the list to be deleted. We wouldn't be without it.

Thanks again for your wonderful magazine.

Irene Forss
San Gabriel, California

Plea for Donor Awareness

You'll never know how many times the "Medical Mailbox" has caused me to mumble a letter to you. But the plea for donor awareness (Jan./Feb. '93) has compelled me to speak out.

The letter telling of Kimberly Fuller's dire need of a double lung transplant touched me deeply. I pray daily for her family and also for the loved ones of the possible donor.

I thank you, Dr. SerVaas, for making aware the necessity of premeditated donations of human organs. There are many whose names are on a waiting list for transplants who could be brought back to health by some stranger/friend's choice.

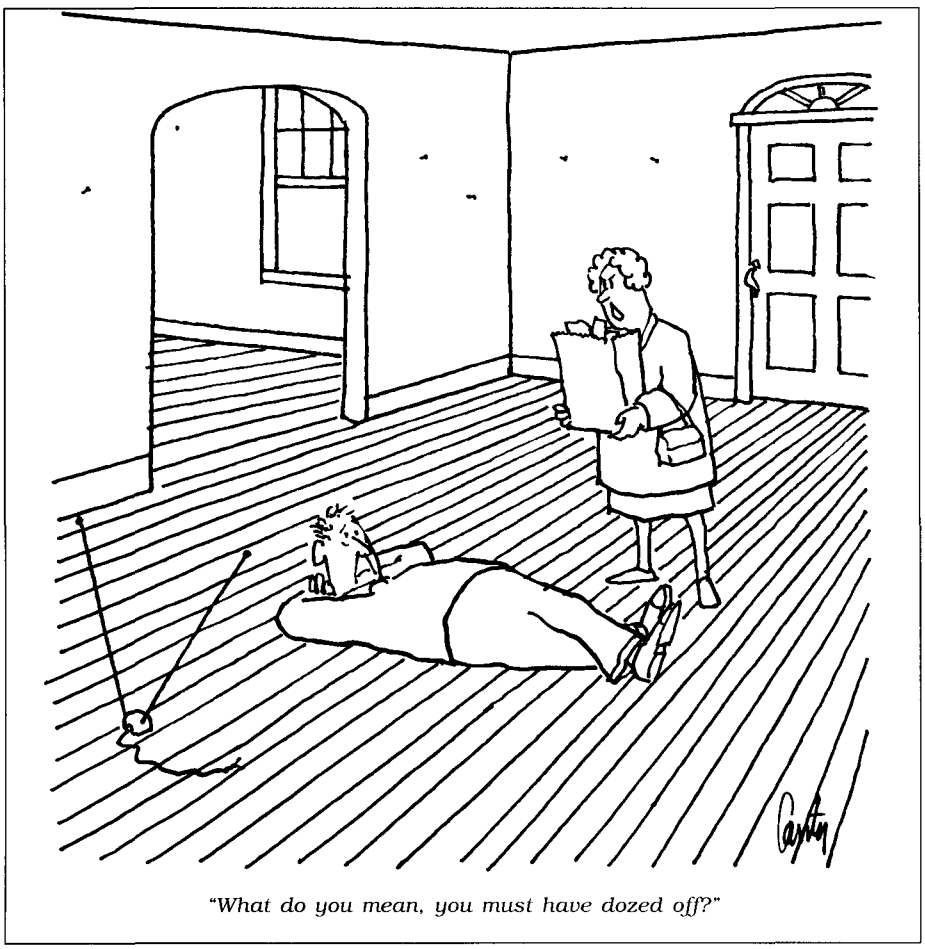
I feel personally about this subject because I received a kidney transplant. After being on dialysis for nearly six years, I was doing badly. There was no donor in my family (my mother, two brothers, and a sister all had renal failure) so my name was put on a list to wait for another possibility.

On May 28, 1978, I received the kidney of a 13-year-old who had been struck on her bicycle. Her family are strangers, but I count them as dearest friends. Though it has been more than 14 years, I am unable to dispel my yearning to thank the family of my donor. Their decision during their time of sorrow saved my life. I wish that family could know how their beautiful act of giving has brought happiness to another family.

I am the mother of three girls and four legal children that came to bless our home after the death of our 13-year-old daughter. So, you see, our hearts understand and go out in sympathy to my donor's family. We thank God for their act of thinking of others at such a time.

I hope the emphasis on donor awareness will produce some "pocket wills" that perhaps someday might cushion the futility of a senseless death and also leave a living tribute.

Elizabeth Rhoads
Lansing, Michigan



"What do you mean, you must have dozed off?"

Bully for Botts!

Thank you for including Botts fiction in your magazine. I have been reading the *Post* for more than 50 years. Always enjoyed reading. Keep the *Post* clean and wholesome. It is still the best magazine being printed.

Erma W. Yost
York, Pennsylvania

PSA Lifesaver

Your magazine is most appreciated, especially because it probably saved my husband's life. I refer to the article "David, Why Did You Wait?" It got my reluctant spouse off dead center and to the doctor for a PSA. He finished radiation treatments about a year ago, and now his PSA is normal, I'm happy to say.

Lila J. (Lee) Hills
Eagle Creek, Oregon

Tulip Time Scholarships

I read about your Tulip Time Race and field day in *U.S. Kids Weekly Reader* magazine. This sounds like a great idea! I really want to know more about your organization and the scholarship prizes. I work at an elementary school in Moses Lake, Washington, and I would love to tell our students about this idea.

I wish I could bring my own sons and some of their jogging friends to your event. Because this is not possible, could you tell me of any other race/playday event like yours in the western part of the United States?

I realize you are busy working on your event, but I would appreciate it if you would please send us some entry forms and any literature and information you have about how you got this started, how you put it together, attendance, etc.

Mary Hirst
Moses Lake, Washington

Medical Malfeasance

The article entitled, "A Story Worth Telling" in the Sept./Oct. issue was sad but so true. Norman Paradis hit the nail on the head when he wrote. "Our health care system is structured to meet reimbursement, rather than patients' needs."

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It is frightening to read that he, as a physician, and his lawyer brother could not crack "the system" for their father, also a physician, when he was dying of pancreatic cancer. They both knew whom to contact and, in spite of repeated requests, they were ignored.

As a nurse, I have seen these same practices of too many X-rays, lab tests, scans, and surgeries performed on patients who need only simple supportive care. Recently I experienced it when my 91-year-old mother was hospitalized. Somehow she lived through all the procedures, but I dread any future hospitalizations for her.

Today's medical technology is superb and has saved many lives. However, too many hospitals and physicians are reaping big dollars from Medicare and supplemental insurance by the overuse of procedures. Norman Paradis referred to it as the "old story of inflated fees charged by sub-specialists with procedure-based practices."

It is rough fighting "the system." Norman Paradis, as a doctor, should have been able to spare his father the pain and suffering of extraneous procedures. He certainly tried.

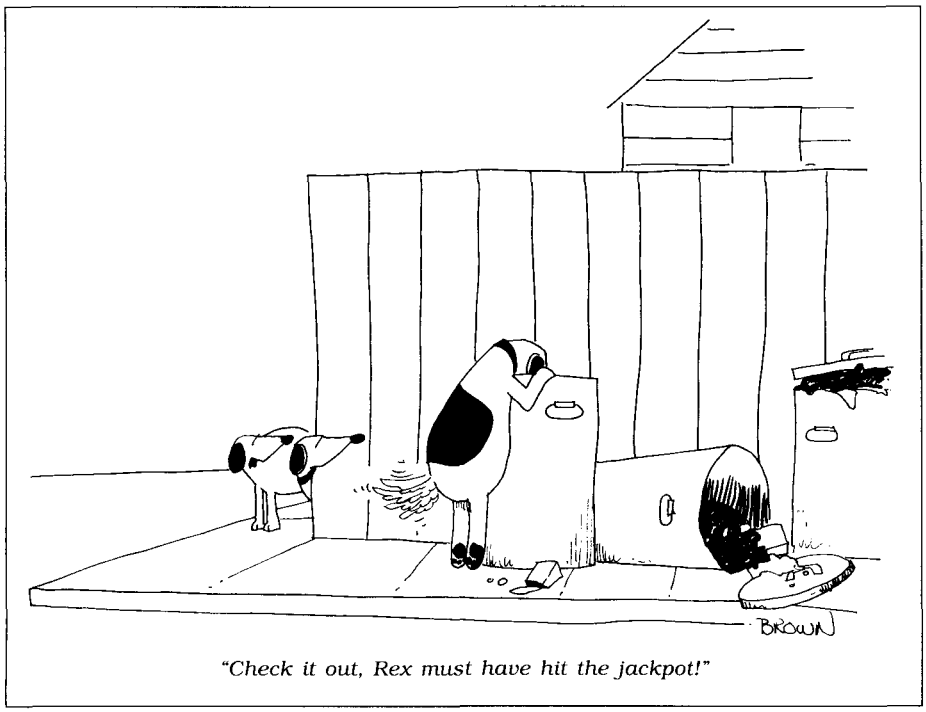
Let us hope and pray that someday soon "the system" that encourages reimbursement will be replaced by consideration of patients' needs as the first and foremost priority.

Sally J. DeSeyn
Canandaigua, New York

Curtain Calls for Cartoons

It's a pleasure to see the attractive, long-familiar drawings of Chon Day among the many ill-drawn cartoons. His simple style puts every line in the right place, with none wasted, so different from the surrounding "modern" attempts at caricature. I sadly observe the trend to purposely portray ugliness. Grotesque distortion seems to be the style. Day is one of the old masters from cartoons' glorious past. Is he possibly a relative of Robert Day, whose perfect drawings and gentle humor I cherished?

Mrs. C. Herbert Straut
Jacksonville, Florida



"Check it out, Rex must have hit the jackpot!"

Bean Eaters' Etiquette

Great to see that you are promoting such a wonderful food: beans!

As to making them more socially acceptable, my family has always added a tablespoon or so of cider vinegar to the initial cooking water. The seasonings added later mask the vinegar flavor. A bit of lemon pepper or ham seasoning will do the trick for white or limas, and chili or ham seasoning for red or pinto.

We're all different; perhaps this won't work for some, but it has always worked for us.

Norma Bennett
Eagle Point, Oregon

In your article, "Beneficial Beans," March/April, you write about the "Social Bean" and the methods for cooking to reduce the problem of gas. You did not mention adding a small amount of powdered ginger. My family always added ginger to the beans, and it wasn't until I was an adult and heard the snickers about people who eat beans that I knew this was a problem. Add about one-fourth teaspoon ginger per cup of beans along with the other seasonings, cook as usual; one can enjoy the beans and still be socially acceptable.

M. Hanks
Falls Church, Virginia

Don't Forget Limas

I think I spotted some in the picture on page 19, but "Beneficial Beans" in the latest *Post* does not mention lima beans, my favorite.

Healthy, economical, and delicious—that's what they are.

Just wanted to share this recipe with you:

Baked Lima Beans
(Makes 6 servings)

2 cups dried lima beans
½ cup diced onion
1 teaspoon dry mustard
3 tablespoons ketchup
2 cups boiling water

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Drain water. Cover with water and cook 20 minutes or until nearly tender. Place half of beans in greased Dutch oven. Sprinkle with ¼ cup diced onion. Add remaining beans, sprinkle with remaining onion.

Combine mustard, ketchup, and boiling water. Pour liquid over beans. Cover. Cook about 2½ to 3 hours at 300 degrees or until beans are tender, adding more water as necessary.

Per Serving (¾ cup):
Calories: 249 Carbohydrate: 44.1 gm
Cholesterol: 2 mg Protein: 13.8 gm
Sodium: 123 mg Fat: 2.0 gm
Diabetic exchange: 3 bread + ½ medium fat meat

Dorothy Keith
Woodburn, Oregon

Giggles Galore

I am writing to tell you how much I enjoy Maynard Good Stoddard's humorous articles in the *Post*. I generally wait until I'm in bed to read them, so I don't fall down laughing.

George R. Ehrman
Kokomo, Indiana

Irritable Bowel Help

I am a high school English teacher, and while my students were working in the library on research papers, I was doing my own research. I remember reading past articles in the *Post* about diets related to Irritable Bowel Syndrome and hemorrhoids. At the time I read those articles, I didn't pay much attention because I did not have those problems. Now I do. In my research, I have not been able to locate those articles, but I have seen mention of a Colitis Club and a diet. Does that club still exist, and how could I become a member? Or could I get a copy of a diet that might help me control the symptoms of this problem? It seems to me I read those articles in the mid- to late '80s. I would appreciate any help that you could give me.

After checking into several other options (school library), I plan to subscribe again. It seems to me that you have the most all-around variety of health-type information. Also your mailbox section has the most comprehensive information I've seen on specific problems. I've learned a lot from reading the *Post*. I appreciate your standards as well.

Suzy Moffatt
Sulphur Springs, Texas

Editor's note: The Medical Education and Research Foundation (P.O. Box 2166, Indianapolis, IN 46206) offers information about promising new research developments on irritable bowel syndrome and other intestinal diseases.

The Colitis Club Quarterly is available from them for $12 a year. We've asked them to send you the colitis diets and a sample of the Colitis Club Quarterly newsletter.

There are many causes of irritable bowel syndrome, and different diets are required, depending on the cause.

Take Folic Acid Before Pregnancy

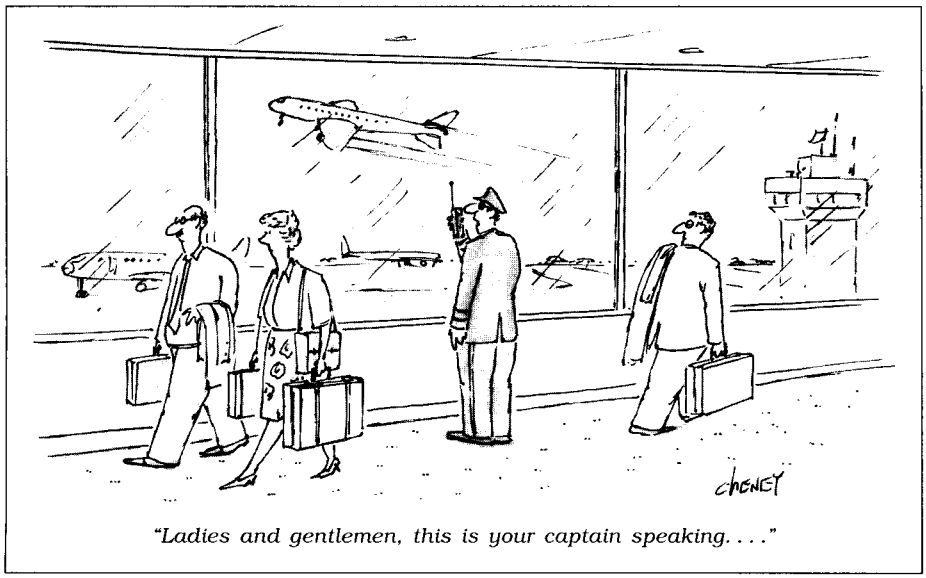
Thanks for the information about folic acid preventing spina bifida and babies born without a brain. I have sent the March/April article "Folic Acid and Pregnancy" to our married daughters.

Their cousin has a child with spina bifida, and he is paralyzed and troubled with kidney infections. I wish his mother had read your *Post* 10 years ago and started taking folic acid then as you advised—before she became pregnant.

Freda Anderson
Kansas City, Missouri

Editor's note: After we went to press for our last issue, JAMA (Journal of the American Medical Association) *came out with three articles about the benefits of folic acid in preventing neural tube defects (spina bifida) and anencephaly (without brain) in the March 10, 1993, issue.*

They concluded, "Based on the embryologic timing of neural tube closure and the findings from this and other studies, folic acid must be consumed prior to a woman knowing she is pregnant. Therefore, to achieve maximal benefit, interventions (supplying of supplemental folic acid) would have to be directed at all women of childbearing potential."



"Ladies and gentlemen, this is your captain speaking. . . ."

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Diabetes Insipidus

I just read the Jan./Feb. issue of *SatEvePost*. I was born 3/31/41 with diabetes insipidus due to a forceps-aided delivery that damaged my pituitary gland. I would be glad to correspond with Roseanne Thomas of Rapid City, SD, or anyone else concerning this problem

Joseph B. Yanni
Oceanside, California

Limbaugh's the Leader

The writer of your "Post People" in the Jan./Feb. '93 issue is incredibly ill-informed or else exceptionally biased. He/she raised the rhetorical question, "Who rivals Phil Donahue as top banana of talk-show hosts? Why, Larry King, of course."

Sorry . . . better check your stats again. You could combine all of Phil's alarmingly shrinking viewership with Larry's claimed four million viewers and listeners and you still wouldn't equal Rush Limbaugh's 13.5 million listeners for his radio show alone (now heard on 546 stations). His syndicated TV program (now on more than 250 stations) exceeds every nighttime talk show except Jay Leno and "Nightline." And he doesn't have the benefit of network affiliation, prime-period viewing hour, doesn't utilize name guest power to draw an audience, and still tops them.

Why not give proper credit where credit is due? Rush doesn't rival Donahue; he buries him.

Ed Myers
Beloit, Wisconsin

Preventing Galactosemia

I am happy to send the results of your excellent medical reports.

When I read your article in the *SatEvePost* two years ago and noted that Tennessee was not protecting the newborn babies by testing for galactosemia, I called Peggy Knight for help. She also was shocked, and she went to work.

I also should report that she ran into opposition: "How much will it cost? Is this another one of those bureaucratic expansions? Doctors are already gouging the public." But Peggy knows when she is right.

However, I will admit I was surprised to have her refer to me as "an elderly constituent." I am only 82. Born in Huntington and lived 15 years in Indianapolis. Just one more reason I am so proud of *The Saturday Evening Post*. So keep up the good work.

Eugene W. Holsworth
Clarksville, Tennessee

2,000 Years and Holding

I was really upset by the full-page "Open Church" ad (March/April '93). I don't know where James Rutz went to church to get all the information he has in the ad. It certainly wasn't to one of our small-town churches.

I can't speak for all the churches, but I know that in United Methodist churches the laymen have a very large part in the services. We have an ordained pastor, but he works *with* the people and we work *with* him. Yes, the church has changed with the changing times; but it has stood for 2,000 years and is very much alive. Our church is very active in the support of missions all around the world and United Methodist Committee on Relief is there when there are disasters anywhere on the world. *Don't count us out, Mr. Rutz.* The Christian churches in America are alive and well, and we plan to continue.

Martha Heller
Elizabeth, Illinois

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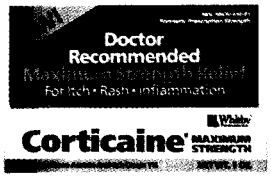

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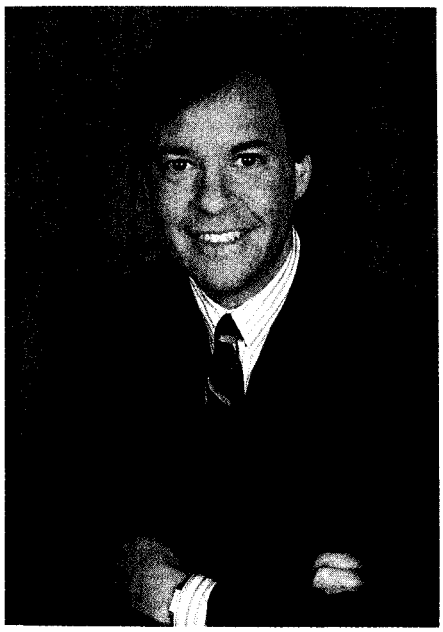
Post People

After nine years as host of "NFL Live," Sunday football's time-out on NBC, popular sportscaster ***Bob Costas*** is stepping down. Leaving NBC also means leaving "Later with Bob Costas," the late-night post-Letterman talk show.

Retiring at 40? No way. Although with his "NBC Showtime," the syndicated "Costas Coast to Coast" radio show, his hours of filling in for Bryant Gumbel on "Today," his three Emmys, and a three-time Sportscaster of the Year recognition by his peers, he certainly would have a right to.



"I want my career to fit into my life," he says (which includes his wife, Randy, and their two sons, Keith, 6, and Taylor, 3), "not the other way around. If the decision is to have a bigger career or a better life, then it's a better life for me."

"I had been told that doing a one-hour show would kill me," says ***Jane Seymour***. "But after reading the script, I was totally blown away."

Where this gifted English actress landed was in the title role of "Doctor Quinn, Medicine Woman," CBS's surprise Saturday night hit series.

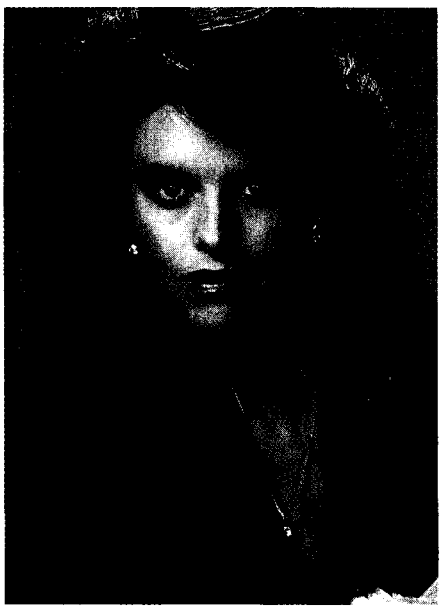
Though a far cry from the comedy she had been looking for, this real-life doctor's daughter found the character close to reality. "I was around microscopes and hospitals all my life," she remembers.

Seymour sees Dr. Quinn as a great role model for kids who only view

women on television as "mythical sexual creatures or someone who's interested in nothing but spending money.

"Dr. Quinn," she says, "is doing something with her life."

Early in her career, TV critics implied that ***Maria Shriver***, niece of John F. Kennedy and wife of Arnold Schwarzenegger, superstar fitness leader and mega-businessman, could have gotten by on name alone. But to those who know her best, she has survived the pressure-cooker world of television news—"CBS Morning News," "NBC's Nightly News," "Sunday Today," and "First Person with Maria Shriver"—by "talent, brains, and a willingness to work hard."



Today, at 37, after 15 years of career building, she wants to spend more time with her daughters, Katherine, 3, and Christina, 1½. She is also feeling another tug—one that pulls most Kennedys: public service. Maria Shriver wants to help children and working women less fortunate than she.

"If Maria decides to do something like public service, she'll do it," says her friend Oprah Winfrey. "I love her because she represents the best of what we can do as women."

When it came to choosing the six American performing artists as winners of the 1992 Kennedy Center honors for "outstanding contributions to the nation's cultural life," Lionel Hampton definitely was not a name picked blindly out of a hat.

CORY SERVAAS

After beating a church drum at age 9, Hampton first made jazz history when he introduced the vibraphone in a 1930 recording with legendary Louis Armstrong. He has been the leading player of the instrument ever since, first with the Benny Goodman band, then his own band, beginning in the early 1940s.

This rise to the top of music stardom, the scholarships he now endows to help residents of a New York low-income housing project, his continual search for young talent, and the benefits he showers upon the University of Iowa School of Music, Hampton credits to the love for his wife, Gladys, who died in 1971.

"Not a day goes by that I don't think of her," he says.

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Ken Kavenski volunteers at a Presbyterian Church Health Fair. After having his prostate cancer detected at a *SatEvePost* screening, he now preaches to the choir.

A NEW BELIEVER IN EARLY DETECTION

The time for a PSA test is now, says a 53-year-old company vice president, who is one of the 'lucky ones.'

by Ted Kreiter

Last August, a newspaper ad for free prostate cancer screening at the SatEvePost Society's "Fitness Fair" caught the eye of Ken Kavenski's wife. She urged her 53-year-old husband to go.

"Naw," he told her, "I don't need to. I'll be getting a physical sometime soon anyway."

It was a typical male response, Kavenski now confesses. "Women are pretty good about having mammograms and pap smears once a year to protect against breast and cervical cancer," he says. "Men, however, tend not to get checked for prostate cancer—but we should."

Fortunately, Kavenski's wife did what caring wives are noted for: she cut out the ad and put it in her husband's briefcase.

She may have saved his life.

"On that Friday, I happened to be on the west side, and I looked at my watch," he recalls. "The testing started at 2 p.m., and it was now 1:30. I thought, OK, I'll go. As a matter of fact, I was third in line. I had the rectal exam, and the doctor indicated he thought my prostate was a little enlarged. But we'd wait for the PSA test to come back."

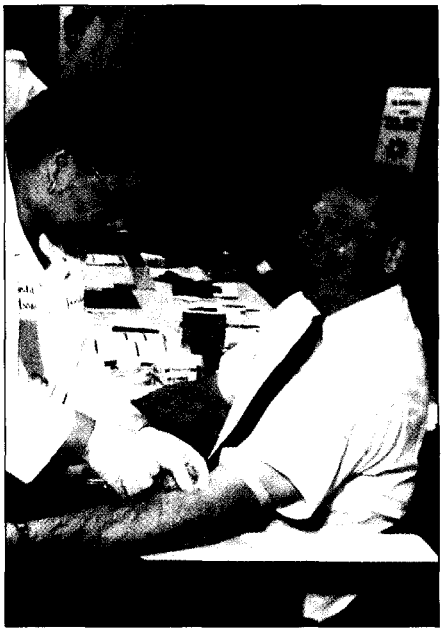
Kavenski, however, couldn't wait. He saw his own doctor immediately on Monday morning. "He checked and said, yes, there was some swelling but probably not a problem," Kavenski says. "He wanted me to have a complete physical, anyway. I hadn't had one in five years. He also suggested that I have an ultrasound done.

"When the ultrasound turned out negative, the doctor said he didn't think there was a problem, just a hypertrophy or something," Kavenski says. "I felt pretty good about that, but then the following week I went in for my physical, and he had my PSA result. It was 13.1. Based on that, he said we ought to biopsy it."

Kavenski made an appointment for the biopsy. The doctor called the next day, Kavenski remembers. "The doctor told me that it was a tumor and that it was malignant. He said the next step was to get a bone scan and a pelvic CAT scan to find out if the cancer had metastasized. He was able to schedule both the next day. We had a meeting with him that evening in his office to discuss the results. This was

continued on page 90

When Jan Kavenski saw an ad in the paper for a free Prostate Cancer Screening at a *Post* Fitness Fair, she cut it out and put it in Ken's briefcase. "Know your husband's PSA," she says.



The Rev. Bill Enright, popular minister of the largest Presbyterian Church in Indiana, gets a clean bill of health and a good laugh. Forty-six parishioners were tested. Only two were abnormal.

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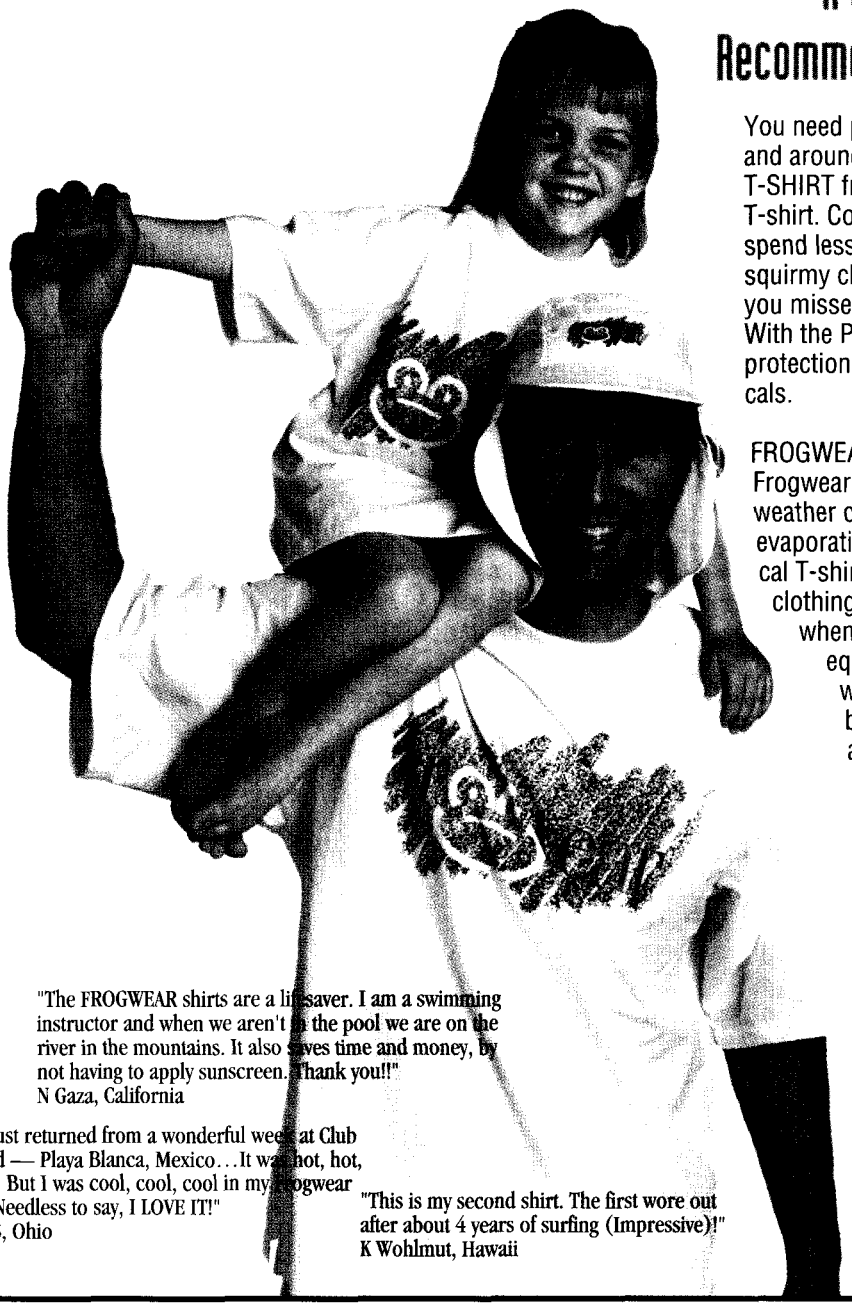

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N Gaza, California

"I just returned from a wonderful week at Club Med — Playa Blanca, Mexico…It was hot, hot, hot. But I was cool, cool, cool in my Frogwear …Needless to say, I LOVE IT!"
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AWFUL HANDWRITING

Scribblers of the world may take comfort in knowing they are not alone in possessing a 'hand like a foot.'

by Bob Quarteroni

Illustrated by Don Trawin

"Be back at six," I had written on the note I left for Sandy.

"Bats bark at sex," is what she unfortunately read.

Sandy is not all that concerned with the mating habits of flying mice; she's merely another lost soldier in the endless parade of those unable to read, even in a vague kind of way, my handwriting.

Such is life for many of us clawhanded scribblers of the world. But I can at least take comfort in knowing I'm not alone in possessing what Jonathan Swift described as a "hand like a foot."

Thomas Carlyle's writing, for example, was described as containing "eccentric and spiteful little flourishes darting about in various odd ways, as if attempting to somersault and destroying the entire word from which they sprung. Some letters slope one way, and some another. Some are halted, maimed and crippled, and all are blind."

And Sidney Smith—whom you owe it to yourself to find out more about—once described his peculiar brand of writing as if "a swarm of ants, escaping from an ink bottle, had walked over a sheet of paper without wiping their legs."

But the all-time master of inky idiocy has to be Horace Greeley. Sidney Harris tells the story of a note Greeley once wrote and its subsequent interpretation. The actual message was this:

"I have waited till longer waiting would be discourteous, only to find that I cannot attend your press meeting next June as I would like to do. I find so many cares and duties pressing on me that, with the weight of years, I feel obligated to decline any invitation that takes me a day's journey away from home. Greeley."

What the recipient of the note decided on, after much frustration and several intuitive leaps, was this:

"I have wondered all along whether the squirt has denied the scandal about the President meeting Jane in the woods on Saturday. I have hominy, carrots and R.R. ties more than I could move with eight steers. If eels are blighted, dig them early. Any insinuation that brick ovens are dangerous to hams gives me horrors. Greeley."

There's a similar Greeley story, from Mark Twain. Twain tells of Greeley writing a note to a Widow Beazley, whose son William had a dream of "making the turnip a climbing vine."

Greeley's note to the widow was interpreted as: "Polygamy dissembles majesty; extracts redeem polarity; causes hitherto exist. Ovations pursue wisdom, or warts inherit and condemn. Boston botany, cakes, felony."

My personal favorite in the trembling vault of cacographic lore is the letter of Thomas Bailey Aldrich to his friend Professor Morse:

"My Dear Morse: It was very pleasant to receive a letter from you the other day. Perhaps I should have found it pleasanter if I had been able to decipher it. I don't think I mastered anything beyond the date, which I knew, and the signature, at which I guessed.

"There is a singular and perpetual charm in a letter of yours: It never grows old, and it never loses its novelty. One can say every morning, as one looks at it: 'Here's a letter of Morse's I haven't read yet. I think I shall have another shy at it today; and maybe I shall be able in the course of years to make out what he means by those t's that look like w's and those I's that haven't any eyebrows.'

"Other letters are read, and thrown away and forgotten; but yours are kept *forever—unread*. One of them will last a reasonable man a lifetime."

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Economical, versatile, low in fat but high in complex carbohydrates, more than ever this spud's for you.

Americans are hearing the message loud and clear that cutting back on fats and eating five or more servings of fruits and vegetables a day can make a dramatic difference in their health.

Bringing the message home, however, is a different matter. Homemakers know that changing the familiar menu brings discord to the dinner table. Solution: In shifting to a healthier diet, work with the familiar.

Potatoes, for example.

America's favorite vegetable is much less fattening than its popular image. In reality, the potato is a dieter's dream. According to the Food and Drug Administration, one 5-ounce potato contains only 110 calories while providing 22 grams of carbohydrates, 3 grams of protein, and 0 grams of fat. Potatoes are also high in vitamin C, copper, folic acid, iron, vitamin B_6, and vitamin B_{12}.

Carbohydrates are the body's primary source of natural energy. Athletes rely on a diet rich in carbohydrate to fuel hardworking muscles. Fat enters the scene in the preparation. Adding butter or cream or frying in oil sends potato calories sky high. Of the total calories in french fries, 70 percent are derived from fat! And fat affects the heart. In countries with a low incidence of heart disease, natives derive 65-85 percent of their calories from carbohydrates, mainly whole grains and tubers.

As for versatility, the potato is second to none. With a little imagination and some easy-to-fix recipes, you can transform the plain face of the potato into the star of your family's dinner table.

♥ ♥ ♥

Mediterranean Seafood Casserole

(Makes 6 servings)

3 medium Idaho® potatoes (about 6 oz. ea.), scrubbed

Chili-Cheese Potatoes ▶

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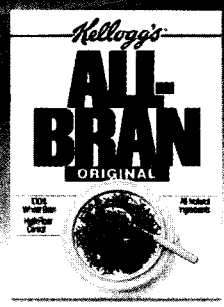

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Have we got the winning combination for you! TUMS to provide your body with extra calcium, and the *Post* to neutralize your sour mood. And we're offering the benefits of bothwith a subscription or renewal to America's favorite magazine for family reading.

Did you know that if a woman doesn't get adequate calcium in her diet, her body will take the required calcium from her bones, and over time this could lead to osteoporosis? TUMS is a pleasant way to help prevent that potentially crippling bone disease. It's a fact that most of us don't come close to getting enough calcium from our diets alone. The 500 mg of calcium carbonate in each TUMS tablet provides 200 mg of elemental calcium, or 20 percent of the adult U.S. RDA. If our arithmetic is correct, five tablets a day adds up to 100 percent. And that goes a long way toward building strong bones and teeth.

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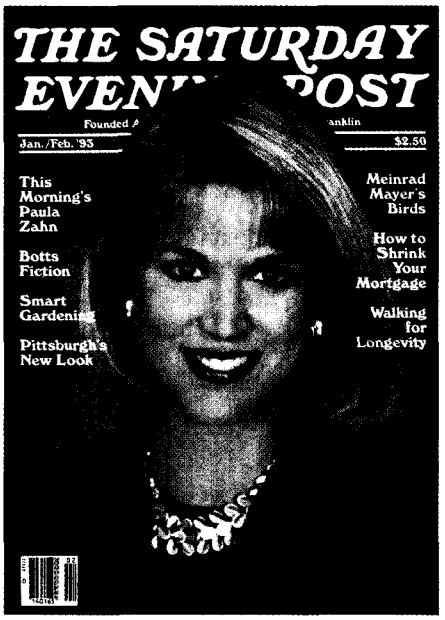

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2 cloves garlic, minced
1 large onion, chopped
1 green or yellow bell pepper, cut into strips
1 can (14½ oz.) low-sodium stewed tomatoes, drained (reserve liquid)
1 teaspoon dried basil leaves
¼ teaspoon dried thyme leaves
1 cup fresh mushrooms, thickly sliced
2 small zucchini (about 6 oz. ea.), cut into 1-inch chunks
6 tablespoons chopped fresh parsley
½ pound bay scallops
½ pound salmon

Cream Sauce:
¼ cup flour
1 cup skim milk

Very thinly slice one potato. In large skillet filled with 1 inch boiling water, cook sliced potato until crisp/tender, about 5 minutes. Drain and reserve potato. Meanwhile, cut remaining potatoes into ¾-inch chunks. Wipe dry skillet and, in same skillet, combine potato chunks, garlic, onion, bell pepper, stewed tomato liquid, basil, and thyme. Bring to boil, then reduce heat, and simmer, covered 10 minutes. Stir in mushrooms, zucchini, stewed tomatoes, and 4 tablespoons chopped parsley. Re-cover and simmer 6 minutes.

Preheat oven to 350°F. Spoon mixture into a 3-qt. shallow casserole dish. Stir in fish, then Cream Sauce.

Arrange sliced potatoes near rim of dish. Loosely cover with foil and bake 20 minutes or until scallops are tender and sauce is bubbly. Sprinkle remaining parsley on potato slices. Serve warm with crusty bread.

Cream Sauce: Combine ingredients while milk is cold and cook until thickened over medium heat.

Per Serving (1½ cups):
Calories: 248 Carbohydrate: 34.3 gm
Cholesterol: 34 mg Protein: 20.3 gm
Sodium: 137 mg Fat: 3.2 gm
Diabetic exchange: 2 bread + 1½ lean meat

♥ ♥ ♥

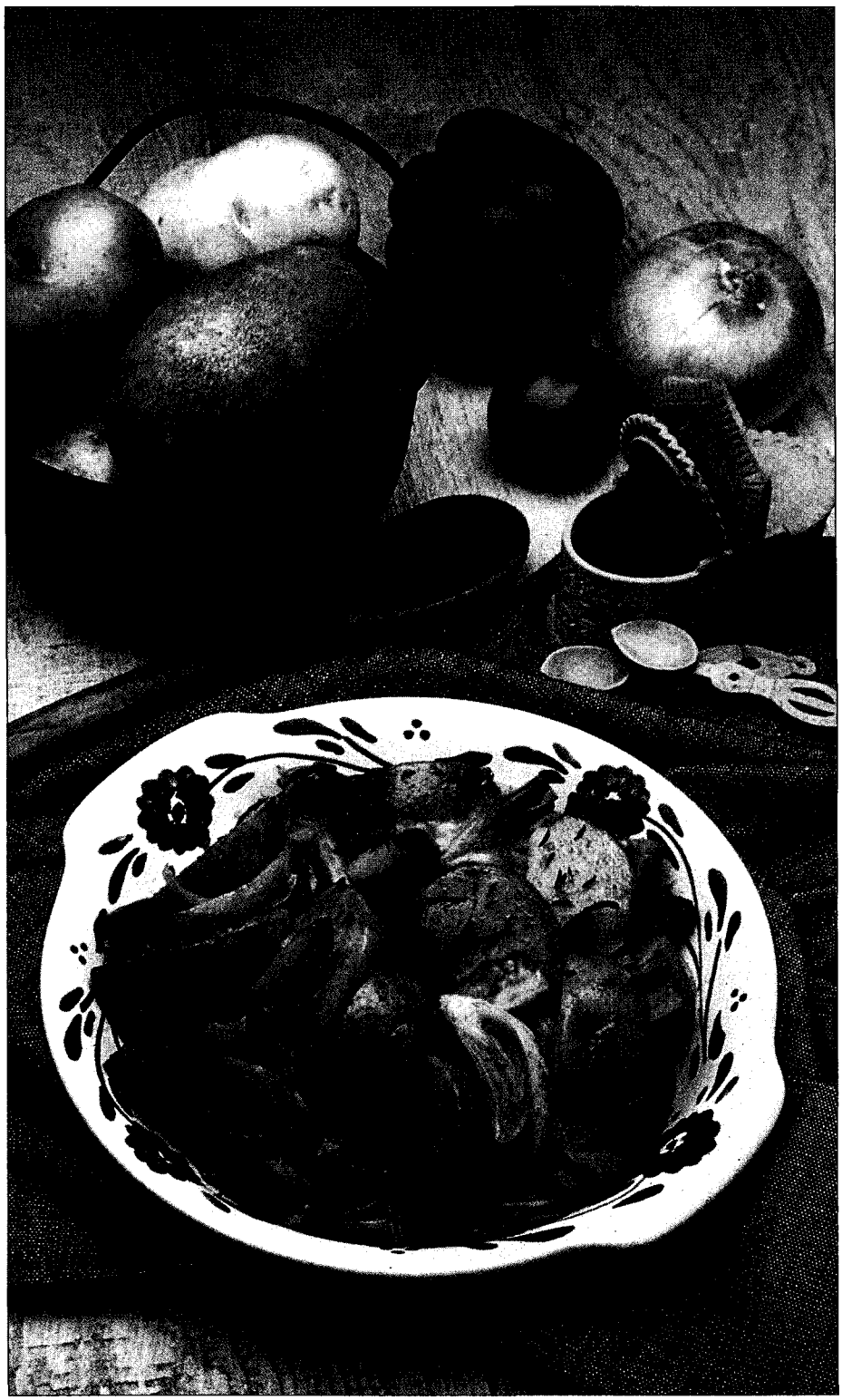
Chili-Cheese Potatoes

(Makes 4 servings)

1 tablespoon margarine
1 tablespoon chili powder
1 teaspoon ground cumin
1 can (15½ ounces) pinto beans, rinsed and drained
1 can (14½ ounces) low-salt stewed tomatoes
4 large hot baked or microwaved potatoes
½ cup plain nonfat yogurt
¼ cup shredded reduced-fat Cheddar cheese

In medium saucepan heat margarine until hot. Add chili powder and cumin; cook and stir until fragrant, 30 seconds to 1 minute. Stir in beans and tomatoes; bring to boil; reduce heat and simmer, uncovered, until sauce has thickened, about 6 minutes. Meanwhile, split potatoes lengthwise; using fork, fluff up pulp. Spoon chili equally

continued on page 91



Potatoes Paprika ▶

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HEARTBEAT

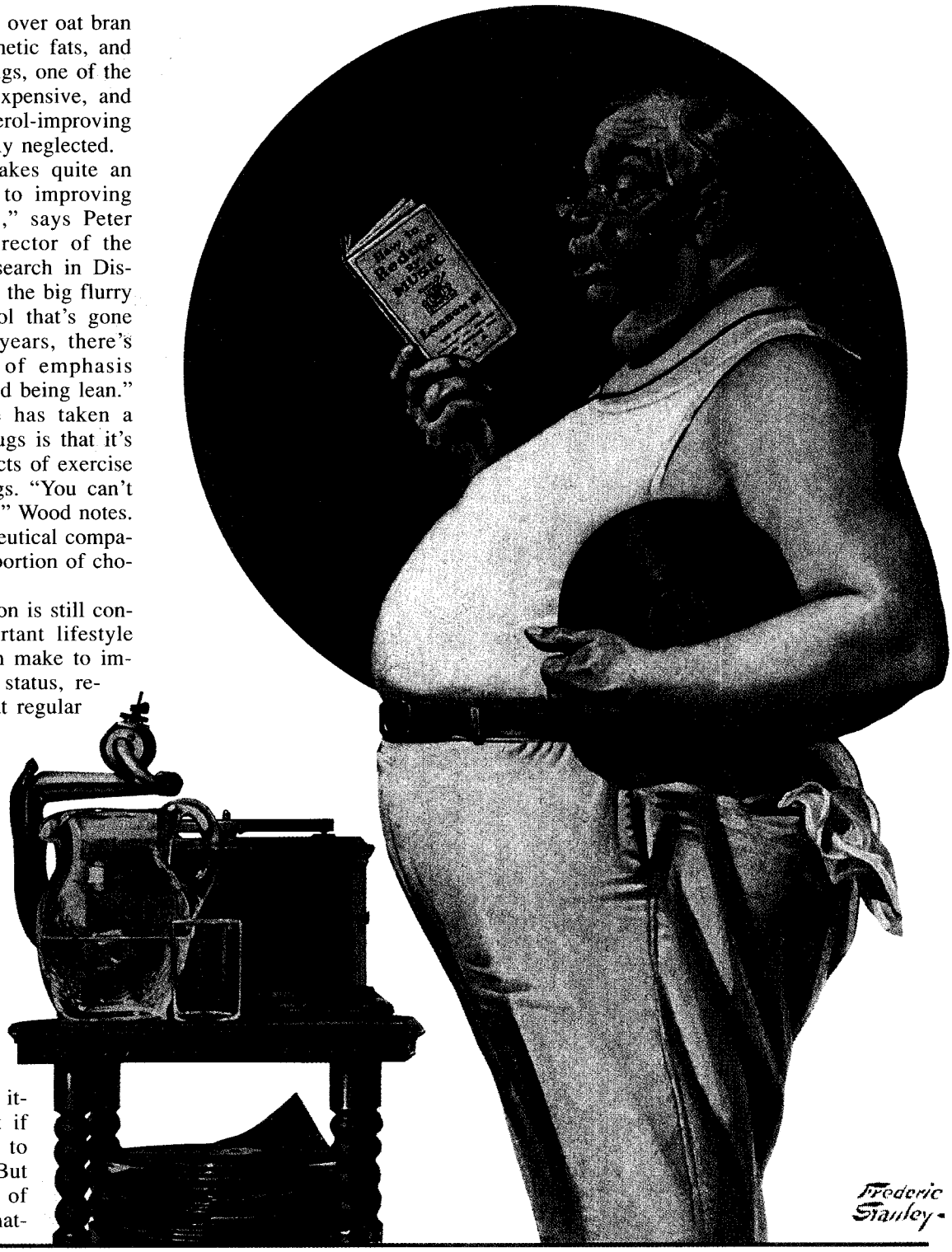
The Healthy Heart Report

SHAPING UP

Heart experts agree: Aerobic exercise is the key to eliminating excess fat and improving your cholesterol profile.

by Carol Krucoff

Frederic Stanley's illustration first appeared on the August 2, 1924, issue of The Saturday Evening Post.



Amid all the hoopla over oat bran and fish oil, synthetic fats, and cholesterol-lowering drugs, one of the simplest, safest, least expensive, and most significant cholesterol-improving strategies has been sorely neglected.

"Regular exercise makes quite an important contribution to improving your cholesterol status," says Peter Wood, an associate director of the Stanford Center on Research in Disease Prevention. "Yet in the big flurry of interest in cholesterol that's gone on over the last few years, there's been a relative lack of emphasis on . . . keeping active and being lean."

One reason exercise has taken a backseat to diet and drugs is that it's harder to study the effects of exercise than the effects of drugs. "You can't have a placebo exercise," Wood notes. Also, food and pharmaceutical companies fund a substantial portion of cholesterol research.

While diet modification is still considered the most important lifestyle change most people can make to improve their cholesterol status, recent research shows that regular aerobic activity:

- Raises the level of "good" HDL cholesterol.
- Lowers the triglyceride level.
- Improves the total cholesterol/HDL ratio.
- Slightly lowers the level of "bad" LDL cholesterol.

"There's still some controversy over whether the benefits of exercise are more due to the muscle contraction itself or to the fact that if you exercise you tend to be slim," says Wood. "But from a practical point of view, I'm not sure it mat-

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CARDIZEM CD
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Brief Summary of
Prescribing Information as of October 1992 (2)
CARDIZEM® CD
(diltiazem hydrochloride)
Capsules

Brief Summary of
Prescribing Information as of April 1992
CARDIZEM® SR
(diltiazem hydrochloride)
Sustained Release Capsules

Brief Summary of
Prescribing Information as of January 1991
CARDIZEM®
(diltiazem hydrochloride)
Tablets

CONTRAINDICATIONS
CARDIZEM is contraindicated in (1) patients with sick sinus syndrome except in the presence of a functioning ventricular pacemaker, (2) patients with second- or third-degree AV block except in the presence of a functioning ventricular pacemaker, (3) patients with hypotension (less than 90 mm Hg systolic), (4) patients who have demonstrated hypersensitivity to the drug, and (5) patients with acute myocardial infarction and pulmonary congestion documented by x-ray on admission.

WARNINGS
1. **Cardiac Conduction.** CARDIZEM prolongs AV node refractory periods without significantly prolonging sinus node recovery time, except in patients with sick sinus syndrome. This effect may rarely result in abnormally slow heart rates (particularly in patients with sick sinus syndrome) or second- or third-degree AV block (13 of 3,290 patients or 0.40%). Concomitant use of diltiazem with beta-blockers or digitalis may result in additive effects on cardiac conduction. A patient with Prinzmetal's angina developed periods of asystole (2 to 5 seconds) after a single dose of 60 mg of diltiazem.
2. **Congestive Heart Failure.** Although diltiazem has a negative inotropic effect in isolated animal tissue preparations, hemodynamic studies in humans with normal ventricular function have not shown a reduction in cardiac index nor consistent negative effects on contractility (dp/dt). An acute study of oral diltiazem in patients with impaired ventricular function (ejection fraction 24% ± 6%) showed improvement in indices of ventricular function without significant decrease in contractile function (dp/dt). Worsening of congestive heart failure has been reported in patients with preexisting impairment of ventricular function. Experience with the use of CARDIZEM (diltiazem hydrochloride) in combination with beta-blockers in patients with impaired ventricular function is limited. Caution should be exercised when using this combination.
3. **Hypotension.** Decreases in blood pressure associated with CARDIZEM therapy may occasionally result in symptomatic hypotension.
4. **Acute Hepatic Injury.** Mild elevations of transaminases with and without concomitant elevation in alkaline phosphatase and bilirubin have been observed in clinical studies. Such elevations were usually transient and frequently resolved even with continued diltiazem treatment. In rare instances, significant elevations in enzymes such as alkaline phosphatase, LDH, SGOT, SGPT, and other phenomena consistent with acute hepatic injury have been noted. These reactions tended to occur early after therapy initiation (1 to 8 weeks) and have been reversible upon discontinuation of drug therapy. The relationship to CARDIZEM is uncertain in some cases, but probable in some. (See PRECAUTIONS.)

PRECAUTIONS
General
CARDIZEM (diltiazem hydrochloride) is extensively metabolized by the liver and excreted by the kidneys and in bile. As with any drug given over prolonged periods, laboratory parameters of renal and hepatic function should be monitored at regular intervals. The drug should be used with caution in patients with impaired renal or hepatic function. In subacute and chronic dog and rat studies designed to produce toxicity, high doses of diltiazem were associated with hepatic damage. In special subacute hepatic studies, oral doses of 125 mg/kg and higher in rats were associated with histological changes in the liver which were reversible when the drug was discontinued. In dogs, doses of 20 mg/kg were also associated with hepatic changes; however, these changes were reversible with continued dosing.
Dermatological events (see ADVERSE REACTIONS section) may be transient and may disappear despite continued use of CARDIZEM. However, skin eruptions progressing to erythema multiforme and/or exfoliative dermatitis have also been infrequently reported. Should a dermatologic reaction persist, the drug should be discontinued.

Drug Interactions
Due to the potential for additive effects, caution and careful titration are warranted in patients receiving CARDIZEM concomitantly with other agents known to affect cardiac contractility and/or conduction. (See WARNINGS.) Pharmacologic studies indicate that there may be additive effects in prolonging AV conduction when using beta-blockers or digitalis concomitantly with CARDIZEM. (See WARNINGS.)
As with all drugs, care should be exercised when treating patients with multiple medications. CARDIZEM undergoes biotransformation by cytochrome P-450 mixed function oxidase. Coadministration of CARDIZEM with other agents which follow the same route of biotransformation may result in the competitive inhibition of metabolism. Dosages of similarly metabolized drugs such as cyclosporin, particularly those of low therapeutic ratio or in patients with renal and/or hepatic impairment, may require adjustment when starting or stopping concomitantly administered CARDIZEM to maintain optimum therapeutic blood levels.
Beta-blockers: Controlled and uncontrolled domestic studies suggest that concomitant use of CARDIZEM and beta-blockers is usually well tolerated, but available data are not sufficient to predict the effects of concomitant treatment in patients with left ventricular dysfunction or cardiac conduction abnormalities.
Administration of CARDIZEM (diltiazem hydrochloride) concomitantly with propranolol *in five normal volunteers resulted in increased propranolol levels in all subjects and* bioavailability of propranolol was increased approximately 50%. If combination therapy is initiated or withdrawn in conjunction with propranolol, an adjustment in the propranolol dose may be warranted. (See WARNINGS.)
Cimetidine: A study in six healthy volunteers has shown a significant increase in peak diltiazem plasma levels (58%) and area-under-the curve (53%) after a 1-week course of cimetidine at 1,200 mg per day and a single dose of diltiazem 60 mg. Ranitidine produced smaller, nonsignificant increases. The effect may be mediated by cimetidine's known inhibition of hepatic cytochrome P-450, the enzyme system responsible for the first-pass metabolism of diltiazem. Patients currently receiving diltiazem therapy should be carefully monitored for a change in pharmacological effect when initiating and discontinuing therapy with cimetidine. An adjustment in the diltiazem dose may be warranted.
Digitalis: Administration of CARDIZEM with digoxin in 24 healthy male subjects increased plasma digoxin concentrations approximately 20%. Another investigator found no increase in digoxin levels in 12 patients with coronary artery disease. Since there have been conflicting results regarding the effect of digoxin levels, it is recommended that digoxin levels be monitored when initiating, adjusting, and discontinuing CARDIZEM therapy to avoid possible over- or under-digitalization. (See WARNINGS.)
Anesthetics: The depression of cardiac contractility, conductivity, and automaticity as well as the vascular dilation associated with anesthetics may be potentiated by calcium channel blockers. When used concomitantly, anesthetics and calcium blockers should be titrated carefully.

Carcinogenesis, Mutagenesis, Impairment of Fertility
A 24-month study in rats at oral dosage levels of up to 100 mg/kg/day, and a 21-month study in mice at oral dosage levels of up to 30 mg/kg/day showed no evidence of carcinogenicity. There was also no mutagenic response in vitro or in vivo in mammalian cell assays or in vitro in bacteria. No evidence of impaired fertility was observed in a study performed in male and female rats at oral dosages of up to 100 mg/kg/day.

Pregnancy
Category C. Reproduction studies have been conducted in mice, rats, and rabbits. Administration of doses ranging from five to ten times greater (on a mg/kg basis) than the daily recommended therapeutic dose has resulted in embryo and fetal lethality. These doses, in some studies, have been reported to cause skeletal abnormalities. In the perinatal/postnatal studies, there was an increased incidence of stillbirths at doses of 20 times the human dose or greater.
There are no well-controlled studies in pregnant women; therefore, use CARDIZEM in pregnant women only if the potential benefit justifies the potential risk to the fetus.

Nursing Mothers
Diltiazem is excreted in human milk. One report suggests that concentrations in breast milk may approximate serum levels. If use of CARDIZEM is deemed essential, an alternative method of infant feeding should be instituted.

Pediatric Use
Safety and effectiveness in children have not been established.

ADVERSE REACTIONS
Serious adverse reactions have been rare in studies carried out to date, but it should be recognized that patients with impaired ventricular function and cardiac conduction abnormalities have usually been excluded from these studies.
In domestic placebo-controlled angina trials, the incidence of adverse reactions reported during CARDIZEM therapy was not greater than that reported during placebo therapy.
The adverse events described below represent events observed in clinical studies of hypertensive patients receiving either CARDIZEM Tablets or CARDIZEM SR Capsules as well as experiences observed in studies of angina and during marketing. The most common events in hypertension studies are shown in a table with rates in placebo patients shown for *comparison. Less common events are listed by body system; these include any adverse* reactions seen in angina studies that were not observed in hypertension studies. In all hypertensive patients taking CARDIZEM Tablets or CARDIZEM SR Capsules studied (over 900), the most common adverse events were edema (9%), headache (8%), dizziness (6%), asthenia (5%), sinus bradycardia (3%), flushing (3%), and first-degree AV block (3%). Only edema and perhaps bradycardia and dizziness were dose related.

Double Blind Placebo-Controlled Hypertension Trials

Adverse	Diltiazem N = 315 # pts (%)	Placebo N = 211 # pts (%)
Headache	38 (12%)	17 (8%)
AV Block First Degree	24 (7.6%)	4 (1.9%)
Dizziness	22 (7%)	6 (2.8%)
Edema	19 (6%)	2 (0.9%)
Bradycardia	19 (6%)	3 (1.4%)
ECG Abnormality	13 (4.1%)	3 (1.4%)
Asthenia	10 (3.2%)	1 (0.5%)
Constipation	5 (1.6%)	2 (0.9%)
Dyspepsia	4 (1.3%)	1 (0.5%)
Nausea	4 (1.3%)	2 (0.9%)
Palpitations	4 (1.3%)	2 (0.9%)
Polyuria	4 (1.3%)	2 (0.9%)
Somnolence	4 (1.3%)	—
Alk Phos Increase	3 (1%)	1 (0.5%)
Hypotension	3 (1%)	1 (0.5%)
Insomnia	3 (1%)	1 (0.5%)
Rash	3 (1%)	1 (0.5%)
AV Block Second Degree	2 (0.6%)	—

The following table presents the most common adverse reactions reported in placebo-controlled angina and hypertension trials in patients receiving CARDIZEM CD up to 360 mg with rates in placebo patients shown for comparison.

CARDIZEM CD Capsules Placebo-Controlled Angina and Hypertension Trials Combined

Adverse Reaction	CARDIZEM CD N = 607	Placebo N = 301
Headache	5.4%	5.0%
Dizziness	3.0%	3.0%
Bradycardia	3.3%	1.3%
AV Block First Degree	3.3%	0.0%
Edema	2.6%	1.3%
ECG Abnormality	1.6%	2.3%
Asthenia	1.8%	1.7%

In clinical trials of CARDIZEM CD Capsules, CARDIZEM Tablets, and CARDIZEM SR Capsules involving over 3200 patients, the most common events (ie, greater than 1%) were edema (4.6%), headache (4.6%), dizziness (3.5%), asthenia (2.6%), first-degree AV block (2.4%), bradycardia (1.7%), flushing (1.4%), nausea (1.4%), and rash (1.2%).
In addition, the following events were reported infrequently (less than 1%) in angina or hypertension trials:
Cardiovascular: Angina, arrhythmia, AV block (second- or third-degree), bundle branch block, congestive heart failure, ECG abnormalities, hypotension, palpitations, syncope, tachycardia, ventricular extrasystoles
Nervous System: Abnormal dreams, amnesia, depression, gait abnormality, hallucinations, insomnia, nervousness, paresthesia, personality change, somnolence, tinnitus, tremor
Gastrointestinal: Anorexia, constipation, diarrhea, dry mouth, dysgeusia, dyspepsia, mild elevations of SGOT, SGPT, LDH, and alkaline phosphatase (see hepatic warnings), thirst, vomiting, weight increase
Dermatological: Petechiae, photosensitivity, pruritus, urticaria
Other: Amblyopia, CPK increase, dyspnea, epistaxis, eye irritation, hyperglycemia, hyperuricemia, impotence, muscle cramps, nasal congestion, nocturia, osteoarticular pain, polyuria, sexual difficulties
The following postmarketing events have been reported infrequently in patients receiving CARDIZEM: alopecia, erythema multiforme, exfoliative dermatitis, extrapyramidal symptoms, gingival hyperplasia, hemolytic anemia, increased bleeding time, leukopenia, purpura, retinopathy, and thrombocytopenia. In addition, events such as myocardial infarction have been observed which are not readily distinguishable from the natural history of the disease in these patients. A number of well-documented cases of generalized rash, characterized as leukocytoclastic vasculitis, have been reported. However, a definitive cause and effect relationship between these events and CARDIZEM therapy is yet to be established.

CARDIZEM® CD
Prescribing Information as of October 1992 (2)

CARDIZEM® SR
Prescribing Information as of April 1992

CARDIZEM®
Prescribing Information as of January 1991

MARION MERRELL DOW INC.
PRESCRIPTION PRODUCTS DIVISION
KANSAS CITY, MO 64114

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ters. You can't find people who exercise a great deal who are fat."

And excess fat puts people at an increased risk of having unhealthy cholesterol levels. Emerging studies indicate that it's not body fat alone that contributes to cholesterol problems but how that body fat is distributed. People tend to store excess fat in different places, determined by heredity and sex hormones. This is why men are more likely to have pot bellies and women "thunder thighs."

"We're finding that a small amount of fat in the abdomen is worse than a large amount of fat in the thighs and hips in terms of cholesterol status," Wood notes. One theory points to the way blood circulates in the body. When it leaves the abdomen, it goes directly to the liver, taking some fat particles with it. The result may be that the liver puts out more cholesterol-containing lipoproteins.

This may explain why "apple-shaped" men are at greater risk of heart disease than "pear-shaped" women.

Ridding the body of excess fat, particularly abdominal fat, is vital to improving your cholesterol profile. "Today, most people agree that weight loss won't work in a permanent sense unless exercise [is] involved," Wood notes.

But helping people lose fat is just one way exercise improves cholesterol levels. "Recent research suggests that passing blood through a muscle that is exercising improves it," Wood says. "Presumably, if you have big muscles and exercise a lot, you would greatly improve your blood."

Exercise has "a separate and additive effect independent of weight loss," says cardiologist Arthur Leon, a professor at the University of Minnesota School of Public Health. In his study, men who exercised without losing weight experienced a 12 percent rise in their "good" HDL levels; men who lost weight without exercise also experienced a 12 percent rise in HDL levels. But men who both exercised and lost weight showed a 22 to 24 percent elevation.

In addition to raising the "good" HDL, exercise slightly lowers the "bad" LDL, says Paul D. Thompson, a cardiologist at Miriam Hospital in Rhode Island and associate professor of medicine at Brown University.

continued on page 75

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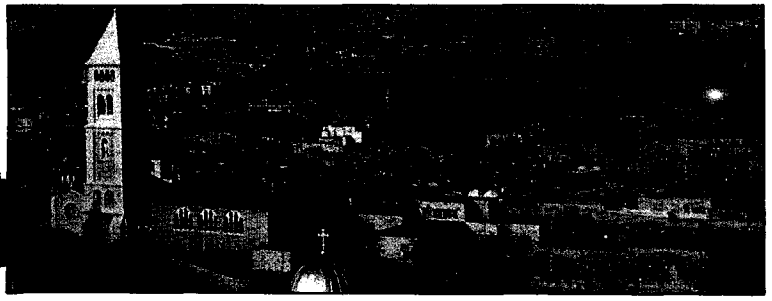

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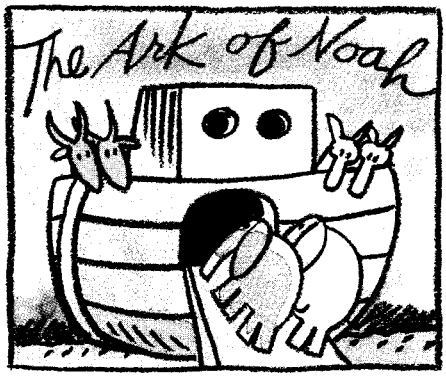

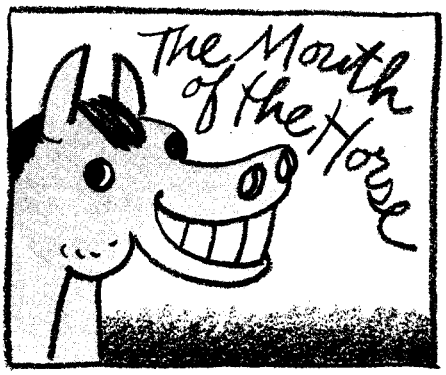

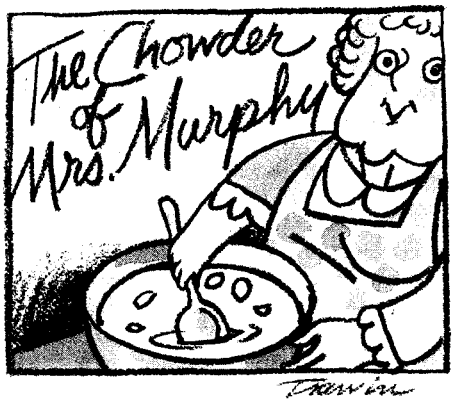

MURPHY'S OTHER LAW

Shakespeare must have known that 'Beware March's *ides' just wouldn't ring in the streets of ancient Rome.*

by Wen Smith

Illustration by Don Trawin

We speakers of English are a possessive lot. The trait is built into our language, all that *apostrophe-ess* stuff like "my brother's keeper," "the horse's mouth," and "someone else's opinion." We like to know what belongs to whom.

Possessives endow us with a comfortable sense of property, of owning, and—even more important—of belonging. They suggest that nothing in this world is unattached, that none of us is an island.

Ours is nearly the only language that uses that peculiar *apostrophe-ess* way of showing ownership and belonging: "my *brother's* keeper," "the *horse's* mouth," "someone *else's* opinion." Most other languages say something like "the keeper of my brother," "the mouth *of* the horse," or "the opinion *of* someone else." In English we can go either way, within limits. The limits are important.

All this came to mind when I heard someone on the radio talking about "the ark of Noah." I turned then to my wife.

"There's an oddity," I said. "Who ever heard of 'the ark of Noah'?"

"It's from the Biblical story. You know, all the animals two by two." My wife is a fountain of knowledge.

"Yes, I know about '*Noah's* Ark,' but not 'the ark of Noah.' It's like saying 'the law of Murphy.' "

"Isn't that the one about how the overalls got into the chowder of Mrs. Murphy?"

"There! You hear how funny that sounds? *Noah's Ark* and *Murphy's Law* and *Mrs. Murphy's chowder* are stock phrases. We have to keep them as they are, not with *of* but with apostrophe-ess."

"How about 'Paul Revere's ride'? Wasn't it really 'The Midnight Ride of Paul Revere'?" She had pinned me on a technicality, but I didn't give up.

"Look, remember last March when we went to Las Vegas for our anniversary? Where did we stay?"

"The palace of Caesar," she said. She is no pushover in word games.

"Nope! You have to say *Caesar's Palace*. And what's that famous painting by James Whistler?"

"The mother of Whistler," she said, and I knew she was putting me on.

"It's *Whistler's Mother*, with *apostrophe-ess*," I said. It sounds off with *of*."

"Well, some things sound funny with *apostrophe-ess*."

"For example?"

"Beware March's ides," she said. "Caesar made me say it."

She had me again. Shakespeare must have known that "Beware *March's* ides" just wouldn't ring in the streets of ancient Rome. Caesar would have turned his deaf ear.

After a moment's thought, I saw some logic in our usage. *Apostrophe-ess* is right for people and animals, like "*Halley's* Comet" and "the *horse's* mouth," but not for inanimate things, like March with its ides.

"Don't you see the pattern?" I said. "We use *apostrophe-ess* for people, as in '*Murphy's* Law.' Same for animals, as in 'the *rabbit's* ears.' But we use *of* for inanimate things. Instead of 'the *wallet's* owner,' we say 'the owner *of* the wallet.' "

"That explains the ides of March?" she said.

"Right. March is not a person or animal. Hours, days, and months can't own anything."

"What about '*Tuesday's* child'? And 'a *day's* work' and '*tomorrow's* news'?"

My wife is an exceptional woman, specializing in exceptions. She had speared me again, and my moment's thought had turned out to be only the thought of a moment.

I decided to take "the ark of Noah" back to the *wordshop* for more study. When an exceptional thinker like my wife is around, it doesn't pay to give usage lessons off your head's top.

And from now on I'll remember Murphy's other law: Beware the brides of March.

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"WHEN I SEE MY EX-HUSBAND, I HAVE THIS SECRET TRICK I PLAY ON HIM..."

by Leslie McClennahan

Did you ever notice that when you're fat, men don't look you in the eye? They look across your shoulder. There's no eye contact.

My name is Leslie McClennahan. I'm a real person. I live near Goose Creek, South Carolina. Up until two years ago, I was never looked in the eye. By anyone.

I was too tired to be a lover to my husband. I was falling asleep by 8 o'clock most evenings. When I did go out for an evening, my husband was ashamed of me. And said so to my face. When I walked, my thighs brushed together. I couldn't even cross my legs. I was fat. Not just "overweight." Fat. I was 5'5" tall and weighed 205 pounds.

About 18 months ago, my husband Darrell left a "Dear Leslie" letter on my dresser. And filed for divorce.

I went for counseling. I knew that my weight was the source of my troubles. But I'd tried 14 different diets. One by one. And I failed at all of them.

My counselor listened carefully and recommended an entirely different program. This wasn't a "diet." It was a unique new weight-loss program researched by a team of bariatric physicians—specialists who treat the severely obese. The program itself was developed by Robert Johnson, M.D. of Charleston, South Carolina.

I entered the program on October 2nd. Within the first four days, I lost only three pounds. So I was disappointed. But during the three weeks that followed, my weight began to drop. Rapidly. Within the next 193 days, I went from 205 pounds to 124 pounds. To me it was a miracle. This was the first time in my life I'd ever lost weight *and kept it off!*

The reason the program worked was simple. I was *always* eating. I could eat *six times every day*. So I never felt deprived. Never hungry. I could snack in the afternoon. Snack before dinner. I could even snack at night while I was watching T.V.

How can you eat so much and still lose weight?

The secret is not in the amount of food you eat. It's in the *prescribed combination* of foods you eat in each 24-hour period. Nutritionally dense portions of special fiber, unrefined carbohydrates, and certain proteins that generate a calorie-burning process that continues all day long... a complete 24-hour fat-reduction cycle. Metabolism is evened out, so fat is burned away around the clock. Not just in unhealthy spurts like many diets. That's why it lets you shed pounds so easily. Without hunger. Without nervousness.

And it's all good wholesome food. No strange foods. You'll enjoy a variety of meats, chicken, fish, vegetables, potatoes, pasta, sauces—plus your favorite snacks. Even some light wine or beer if you wish.

This new program must be the best kept secret in America. Because, up until now, it's *only been available to doctors*. No one else. In fact, The Charleston Program has been used by 207 doctors in the U.S. and Canada to treat more than 62,500 patients. So it's doctor-tested. And proven. This is the first time it's been available to the public.

There are other benefits too...

- ▷ There are no amphetamines. No drugs of any kind.
- ▷ No pills. No powders. No chalky tasting drinks to mix.
- ▷ There's no strenuous exercise program.
- ▷ You don't count calories. Just follow the program. It's easy.
- ▷ There are no daily charts or records to keep.
- ▷ You eat foods you enjoy. Great variety. Great taste.
- ▷ You can dine out.
- ▷ There's much less fluid retention.
- ▷ There's no ketosis. No bad breath odor.

But *here's* the best part...

Once you lose the weight, you'll *keep it off*. Permanently! I guarantee it!

Let's face it. We all have "eating lifestyles." Our eating habits usually include three meals a day. Plus two or three snacks. We all love snacks. Especially at night.

But most diets try to force us to change all that.

And that's why they fail!

The Charleston Program lets you *continue your normal eating lifestyle*. You can eat six times a day. You can snack when you wish. So, when you lose the weight, you can keep it off. For good. Because no one's forcing you to change.

Here are some *other patients* from South Carolina who entered Dr. Johnson's program with me.

Marie C. is a 42-year-old woman who went from 167 to 139 pounds in just three and a half months.

As I got into the program, I began to feel better, to develop more energy. Now my husband has trouble keeping up with me—in every way! I'm proud of my new body.

Dr. Karl D. is a 36-year-old man who went from 275 to 145 in only *six months*!

...words cannot describe how good I feel. I'm not hungry or tired at all. I feel alive again!

Fran H. is a 52-year-old woman who went from 223 to 135 in five months.

The world treats you differently when you're fat... not just the social world, but the business world. My whole world has changed since getting those 88 pounds off!

Josette C. is a 33-year-old woman who went from 165 to 119 in four months.

My husband has started looking at me the way he did before we got married. He's starting to show jealousy when other men look at me or want to talk to me... it's wonderful.

And then there's *me*.

Whenever I see my ex-husband, I have this secret trick I play on him. I know a restaurant where he goes with some of his "buddies." I love to go there with a date—I have plenty now—stroll past his table and whisper, "Hello, Darrell."

I know through the "grapevine" that his friends often ask about me... Who am I?... Am I single? And he has to tell them. I love it.

Obviously I'm excited about the program. This is the first time it's been available outside of a clinical setting. Dr. Johnson has asked Green Tree Press, Inc. to distribute it.

We'll be happy to send you the program to examine for 35 days. Show it to your doctor. Try it. There's *no obligation*. In fact, your check won't be cashed for 31 days. You may even post date it 31 days in advance if you wish.

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Or keep it longer. Try it for six months. Even then, if you're not continuing to lose weight on a regular basis, you'll receive a full refund. Promptly. And without question. This is the fairest way we know to prove to you how well this new program works.

To order, just send your name, address and postdated check for $12.95 (plus $3.00 shipping/handling) to The Charleston Program, c/o Green Tree Press, Inc., Dept. 465, 3603 West 12th Street, Erie, Pa. 16505.

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SPEAKING OUT

BREATHLESS

'Don't Smoke' is a dying emphysema patient's warning as he recalls the 'glamour' of lighting up in the movies.

by Ralph Baird

I expect to die soon—sooner than I expected.

In retrospect, I'm really not sure who's to blame. Perhaps it was Fred Astaire or Cary Grant. Maybe Myrna Loy or Ginger Rogers. When I was entering my teens, Cary and Fred were my idea of ultra-sophisticated men. Myrna and Ginger topped my list of sophisticated women.

I went to all their movies and thought how admirable they were as they drove their convertibles and wore their evening clothes. They engaged in brilliant, funny repartee with friends galore. They were suave and debonair. They danced and drank until dawn.

And, through it all, they smoked their cigarettes.

I couldn't afford a convertible or a tux. I really wasn't a very good dancer. My repartee, I felt, was above average. I had enough friends. And I didn't smoke! However, cigarettes—the ultimate mark of true sophistication—were only 15 or 20 cents a pack and readily available to anyone who wanted to buy them.

I did.

Suave and debonair stars danced and drank until dawn, and through it all, they smoked their lethal cigarettes.

Cigarettes were a necessity of living. It was obvious that you had to smoke while making a phone call, writing a letter, or solving a problem. Cigarettes—from the slim case in your pocket or the silver box on your desk—were what you always offered to a visitor or friend. Cigarettes were a great icebreaker and provided you with something to do while waiting for someone.

There were no antismoking messages then. There were lots of pro-smoking messages. On billboards. In radio commercials. In newspapers and magazines. In your father's pocket. In your mother's purse.

"Be happy, go Lucky!" "I'd walk a mile for a Camel!" "Not a cough in a carload!" "Winston tastes good!" "Call for Phillip Morris!" "So round, so firm, so fully packed! So free and easy on the draw!"

The messages were always upbeat and cheerful. They were delivered by smiling, happy, healthy-looking young men and women. While we'd never heard of "subliminal advertising" then, that's really what was being used. (And quite effectively, too!)

I maintained a sort of amateur smoking status until I started working as a newspaper reporter. A cigarette, usually drooping from a corner of the mouth, was part of the required uniform, along with a snap brim hat with the press pass jutting from the band. (Yes, we really *did* do that with the press pass, just like in the movies!) So I made a rapid transition from amateur smoker to "professional" with a two-pack-a-day habit—a habit I was able to maintain for the next 45 years.

It wasn't difficult maintaining the habit. All I had to do was buy a carton of whatever I happened to be smoking at the time. At first it was a carton when we bought the groceries on Saturday. Then, I found myself picking up an extra carton toward the end of the week. I had successfully acquired the habit—or at least part of

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it. Now all I had to do was remember *when* to display my sophistication.

I had to light up first thing in the morning, as soon as I got up. Of course I also had to have one last drag just before I went to sleep at night. A cigarette was always necessary as soon as I finished a meal and when I sat down for a cup of coffee or a drink. It was imperative to smoke whenever I got on the phone or started to write a news story.

Nervous? Smoke a cigarette! Tired? Light up! Happy? Reach for the pack! Depressed? You deserve a relaxing drug! Intermission? Head for the lobby and nicotine nirvana! Cigarettes were useful for all occasions, activities, and mental conditions—a faithful companion and support mechanism that made you look *good*!

Admittedly, not everything about smoking was positive and helpful, such as the occasional burns on the carpet and upholstery when the lighted end fell off (or on the bedsheet when I fell asleep). Or the charred "spark holes" in various jackets or pants. But these were merely "accidents" that would easily be avoided in the future when, I promised myself, I would be "more alert."

There were a few other aspects of living that were momentary irritants but not significant enough to cause lasting concern: the five-minute coughing session and the foul taste each morning, the brown film on the inside of the car windshield and windows (which wasn't really noticeable until I washed them), and the smell of the car's interior (which also wasn't really noticeable after awhile).

Then there were the brown stains on my handkerchief or a tissue when I blew my nose. And the looks of disapproval accompanied by a frantic waving of hands and an occasional fake cough when I lit up in my children's presence.

But none of this was enough to deter me; it simply came with the territory. Cigarettes had become an important and integral part of my daily life.

In the year before Pearl Harbor, I was declared 4-F and excused from military service because of chronic asthma I had experienced since I was five years old and a history of eye and ear problems. So I spent the war years behind a news desk, with my cigarettes on hand to help me deal with deadline pressure, writer's block, missed meals, and all of the other problems faced by

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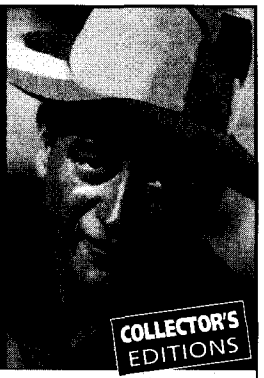

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reporters and editors.

During the war, all activity was geared, of course, toward supporting the fighting forces overseas. Rationing was imposed on many foods and other products to assist in the war effort. Although cigarettes weren't rationed by the government, they were effectively rationed by the tobacco companies, who were sending millions of free packs of the popular brands to our servicemen.

As a result, only "off-brands" of cigarettes were available in civilian stores most of the time, and you had to stand in line to get them. Rather than quit smoking and do without, I gladly stood in line for as long as an hour to be able to buy two packs of Picayunes or Rameses!

During this period, I tried pipes, cigars, and rolling my own. The first two were not very satisfactory, and the last was unsatisfactory until I bought a cigarette-rolling machine. I bought tobacco to roll, but when it was unavailable, I used tobacco from the butts of cigarettes I had saved from previous smokes. This didn't last too long. The war ended and my favorite brands reappeared.

My wife, Helen, and I were married during this period, and we ultimately had six children. Guess what I did in the "fathers' waiting room" during each birth? (This was long before the current involvement of fathers in this process.) Naturally, I burned up another pack or two of cigarettes!

How was all this affecting my health? Not at all, I told myself. I had a morning cough, but then I couldn't remember when I *hadn't* had a morning cough. I moved from newspapers into public relations and, finally, government relations. Each of these subsequent careers, I was convinced, required cigarettes as part of my daily "uniform" along with a button-down Oxford shirt and a "sincere" tie.

In my later occupations, my employer provided a thorough annual physical. Each year, the doctor would assure me I was in good health, except I would be better off if I'd "lose a little weight" and "cut down on the cigarettes."

"You're right, Doctor, I'll try!" I told the chubby M.D. as he pulled his Ronson out of his pocket and prepared to light up. (In all fairness, I should point out that these occasions were pre-Surgeon General's Report.)

I really did try to quit. About every six months or so I'd make a resolution to stop and I would deprive myself for several hours or even most of a day, but of course none of this "quitting" really worked. Then I tried cigarette holders with filters, which were supposed to remove the harmful tars and nicotine. These didn't do the job.

I asked my family doctor a couple of times if I had emphysema, but he assured me I didn't—it was just my asthma recurring. He prescribed pills and inhalers to help me breathe.

So life went on, with my breath getting shorter and shorter each year. When we had visitors to take on tours of Washington, D.C. (we were living in nearby Virginia at the time), everyone had to wait for me as I lagged behind in any walking ventures we might undertake.

Then Helen and I visited a couple of our children who had moved west with their families. One was in Colorado Springs, the other in Salt Lake City. We had to cut our Colorado visit short, and I wound up in the hospital in Utah. Bad altitudes!

The straw that broke the back of the Camel (and Chesterfield, and Marlboro, etc.) was a recurring chest pain that drove me back to my doctor. He finally acknowledged this was more than asthma and occasional bronchitis. It was those problems *plus* emphysema!

I found it difficult to walk to the second floor of our house, where our bedrooms were located. I no longer could mow the lawn. I had trouble walking up our driveway or our street, each of which had only a slight grade. Finally, I managed to contract a bronchial infection and wound up in the hospital for a week.

A young woman from the hospital's respiratory care unit paid me a visit. I asked her if there were anything I could do to strengthen my lung power. "Sing," she said. "One of the best exercises is singing in a choir. A good choir director will teach you how to breathe properly." (She didn't know I'd been a bass in our church choir for about 15 years and had been taught diaphragm breathing.)

However, this gave me an idea. All the choir members knew about my heavy smoking and were urging me to quit. Many of them had been smokers, too, but had quit. We were about to have our choir's annual New Year's party, so I decided this would be a good occasion to really give up smoking.

All my previous attempts to quit had been "on my own," which gave me an easy opportunity to resume smoking without any recriminations or much guilt. I knew if everyone in the choir knew of my resolution, they would be checking to ensure I kept my promise. So, at quarter to 12, I pulled out a Kool and announced to my friends, "This is my last cigarette!" I smoked until midnight, put out the smoldering butt in an ashtray and threw away a crumpled pack with three cigarettes in it. That was eight years ago, and I haven't smoked since. The damage, however, had been done.

In an effort to cope with my problem, we decided to sell our four-level home and move out of the Washington area to a warmer climate and a single-level house with little or no lawn to mow, no leaves to rake, and no snow to shovel.

We wound up moving to Plant City, Fla. We were fortunate to find a good family physician right after we moved.

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We were even more fortunate to find an excellent hospital in Plant City, only five minutes from our house. We were fortunate because I wound up in the hospital three times during our first Florida year. The second year I was in four times. The third year found me there six times.

Then there was last year; I was in the *hospital* only three times. However, after my second visit in April, I came home to a hospital bed in my own house. During the two-week stay in April, I went through a kind of pre-death experience that most pulmonary specialists say COPD (Chronic Obstructive Pulmonary Disease) patients will have: painless, quiet, somewhat euphoric as the oxygen/carbon dioxide ratio in the body changes. Not a bad way to go!

You may have this experience more than once, I was told, but it appeared that about everything that could be done for me in the hospital had been done, so I might as well go home to spend my last days. I believed it, Helen believed it, and I think at least two of the three doctors who had attended me believed it.

So I checked into the hospital bed that had been installed in my home and proceeded, sure enough, to have the same near-death experience again—twice! The word went out to our six children—scattered from Boston to Washington, D.C., to Colorado and California—and to friends in churches in Florida and Virginia. Cards and phone calls materialized, but, even more importantly, prayers on my behalf began.

After the second manifestation of my probable imminent demise, our children came home from all around the country for a brief visit on one weekend around Mother's Day. Within a few weeks, I started feeling better and then I felt guilty because they'd spent all that money on airfares and I didn't die!

We did accomplish a few useful things, however. Helen and I gathered all the important papers she would need into one spot so she would know where they were and how to get to them. We also made arrangements and prepaid our cremations, so that was now out of the way.

Most important, however, I really felt the tremendous outpouring of prayer on my behalf by family and

continued on page 90

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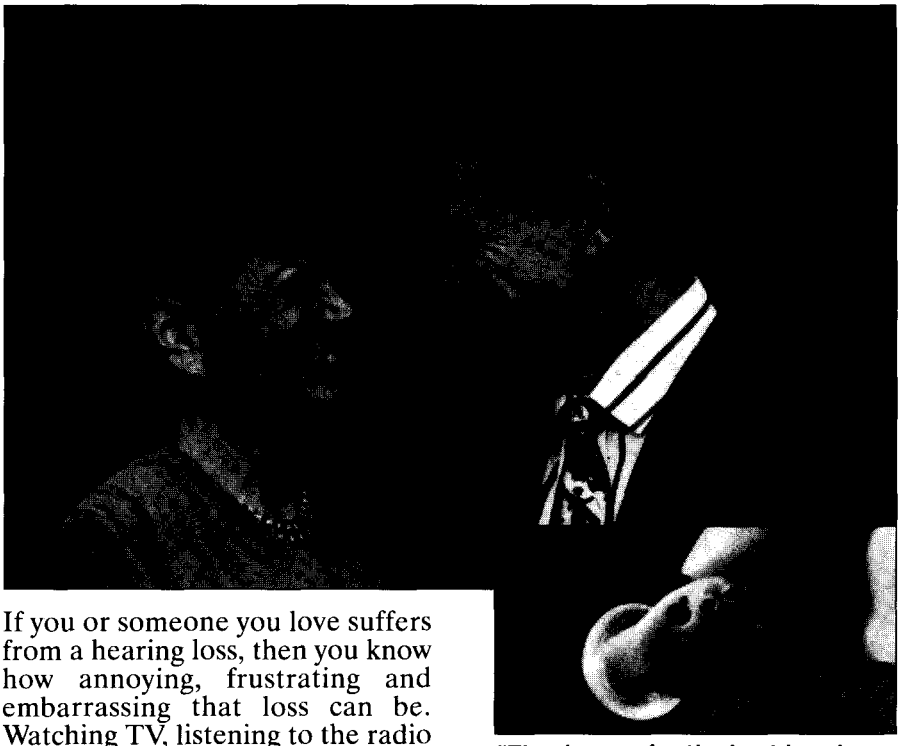

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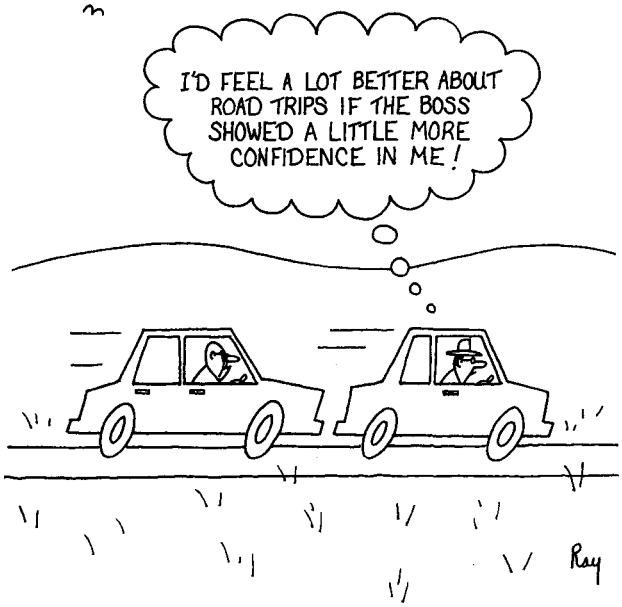
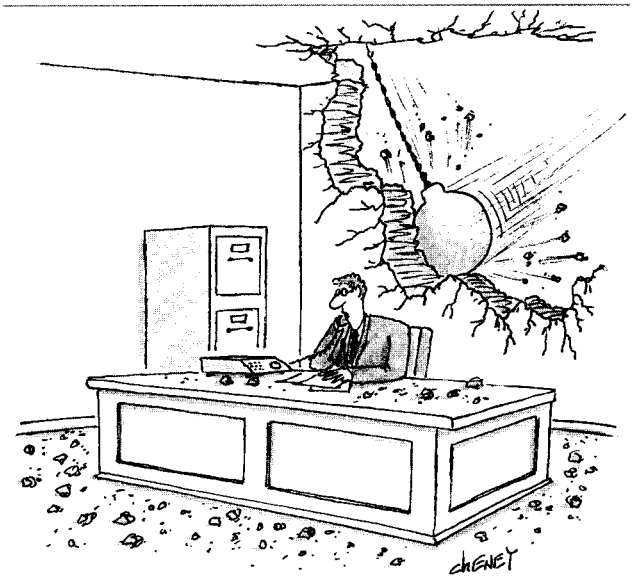


"Lots of people turn to fantasy to help them cope with difficult economic times, Mr. Dubin."

"Whoever's selling inside information to the opposition has to be somebody high up in the organization!"

"It's frustrating—you vote to spend billions and billions of dollars, and nobody appreciates it!"



"Oh, not bad . . . how are things with you?"

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How a Stop in a German Shoe Store Ended a Lifetime of Foot Pain...

"We were in Germany on the very first day of our vacation and my feet were already killing me. I thought a pair of more comfortable shoes might help and I fell in love with a pair in a shoe store in Wiesbaden, Germany.

"But when I tried them on, they hurt, too. I explained my problem of sore aching feet to a friendly clerk and he pointed to a counter display and said, maybe I needed a pair of special Leather Insoles.

"I took his advice and was I glad I did...the instant I slipped them into my shoes, my foot pain vanished! I've worn them ever since and my painful foot problems are a thing of the past."

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"I had sore feet for a long time, but not anymore thanks to your insoles."
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_____ Two pair only $6.95 ea. total $13.90 add $1.75 P&H
_____ One pair only $7.95 add $1.50 P&H
_____ Four pair only $27.80 (save $10) Postage FREE
Washington residents please add 8.2% state sales tax.
Charge my ☐ VISA ☐ MASTERCARD

Card # _____ Exp. Date _____
PRINT Name _____
Address _____
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POST SCRIPTS

Get Busy

Doing nothing is the most tiresome job in the world because it's not possible to stop and rest.

—Sam Ewing

My Home Is My What?

People praise home owning.
Their words are smooth and facile.
I fix, I mend, I paint, I repair.
This man's home is his hassle.

—Rex H. Knowles

Better Not Take It

The reason I give good advice and very seldom take it is that I learn more and suffer less when other people make my mistakes for me.

—Ron Zeh

Right Way to Roll?

When refilling a spindle with toilet tissue,
The direction of replacement is the issue.
It's a nagging question that makes us wonder,
Should the tissue paper roll over or under?

—Irene Schneider

Calculated Answer

A coed asked her friend, "Have you read any good mysteries lately?"

"Yes, I'm reading one now."

"What's the title?"

"Advanced Algebra."

—Martha J. Beckman

Have Credit, Will Travel

People don't take vacations any longer. It's vacations that take people!

—Robert H. Forrest

Happier Than They Know

If ignorance is bliss, why aren't more people happier?

—Sam Ewing

Long Sentence

At recess a first-grader ran up to his teacher, sobbing bitterly. "What could possibly be that bad?" asked the teacher.

"I don't like school," wailed the boy, "and I just found out I have to stay until I'm 18."

"I wouldn't worry about that," said the teacher. "I have to stay until I'm 65."

—JoAnn Ridings

A Dead Ringer

There ought to be a way we could
Not hurt the story line
But muffle TV phones that ring
So I'd not answer mine.

—Ralph Shaffer

The Eyes Have It

The baseball fans
Are truly great,
Being able to see from 400 feet
What the umpire can't see right at the plate.

—Harold Helfer

Two for Won

The best proof that money can buy happiness is going to a good sale.

—Ron Zeh

Compensation

I am really glad to see,
As the Cup of Life fills to the brim,
How gracious Father Time can be
Instead of always seeming grim.

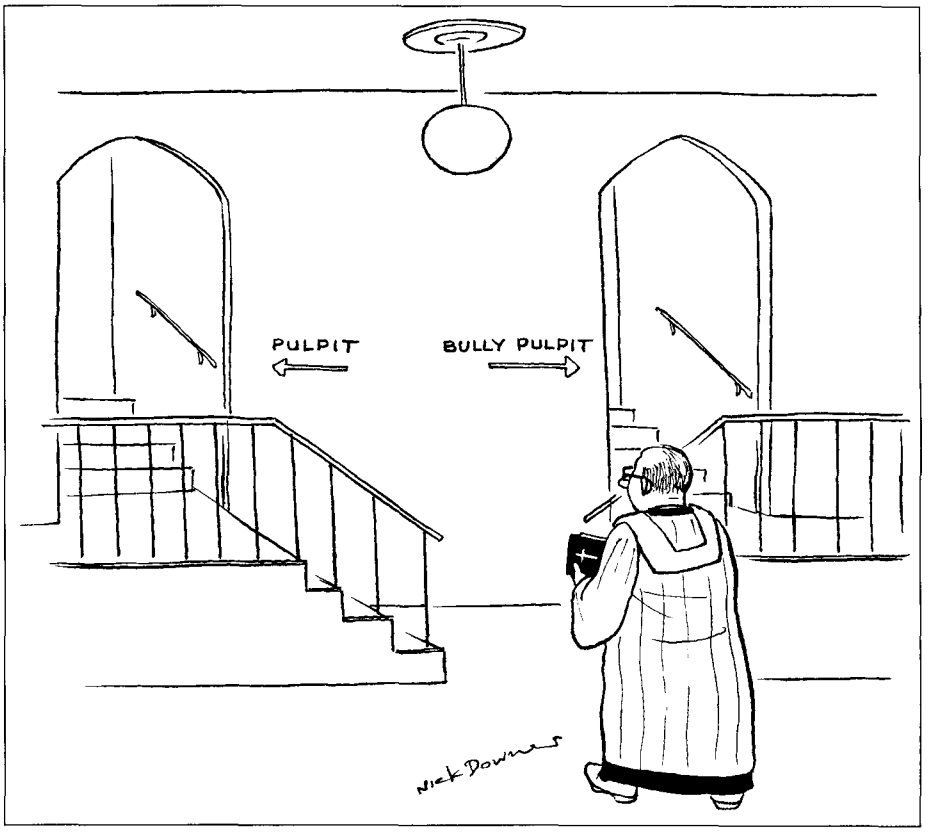
Like me, my love's not wrinkle-free.
His eyes, and mine, are growing dim;
And so he still looks good to me,
And I don't look so bad to him!

—Nancy B. Chapman

Wasted Effort?

Forgetting can sometimes
cause considerable regret.
Did I not ever know
or did I just forget?

—Wilda N. Walker



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"Personally, I think this new reorganization plan stinks."

Try, Try Again

I write for an award,
But my only accord
Is a fine collection
Of slips of rejection.

—*Howard F. Trotter*

Tit for Tat

My paring knife, he would often use
For opening cans or turning screws.
Nor would he listen to my complaint
'Til I used his chisel for stirring
paint.

—*Ruth E. Lancaster*

To Papa Fowler, with Love

I can see your smile and hear your
voice,
as a distant laugh echoes in my ear.

I can see your wit and hear your
advice,
as a distant laugh echoes in my ear.

I can see your pride and hear your
whisper,
as a distant laugh echoes in my ear.

I can see your courage and hear your
encouragement,
as a distant laugh echoes in my ear.

I can see your love and hear your
laughter,
Now the distance seems very near.

—*Sara Arthur*

Enjoy the Silence

A tourist entered a country store in Vermont and found a group of local men idling by the stove. The tourist tried time after time to get a conversation going, but with no success.

"Well," he exclaimed finally, "is it against the law to talk around here?"

"Ain't no law against it," said a native. "But around here a man don't speak lest he's sure he can improve on the silence."

—*Thomas LaMance*

New Excuse

Scientists say
there's a warming trend,
that life as we know it
on earth will end.

I guess it makes sense,
I guess that I'll buy it;
at least it's a reason
to cheat on my diet.

—*Patricia Martin*

Wrong Feat?

The nursery school teacher said to a youngster, "You have your overshoes on the wrong feet."

The youngster replied, "I have no other feet."

—*Elaine Neren*

Repeat Performance

Last year I paid the IRS,
Even though it brought me pain,
But still they're not satisfied;
This year I'm paying again!

—*Rosemary Perry*

First and Last

Famous first words: Waaah, waaah, waaah!

Famous last words: Let's have one for the road, bartender.

—*Robert E. Tinsley*

No Laughing Matter

There once was a silly young bloke,
Who smoked cigarettes as a joke.
After quite a few hundred,
he knew he had blundered,
"Cough, gasp, splutter, splutter,
choke, choke."

—*Walt Hopmans*

Budget Stretcher

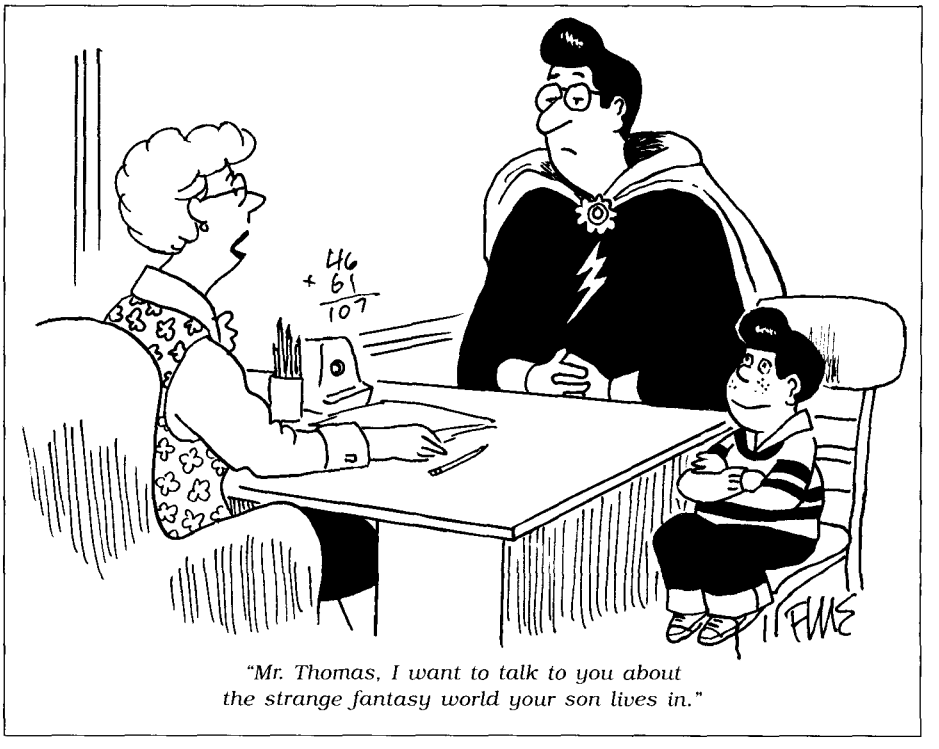
The only way to get the most out of a dollar these days is to have two of them.

—*Morrie Gallant*

Ready to Snap

You don't just automatically become stressed out—you have to be taut.

—*Frank Tyger*



"Mr. Thomas, I want to talk to you about the strange fantasy world your son lives in."

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MONEY TALK

A PASSING FANCY: TRANSFERRING A FAMILY BUSINESS AT LESS COST

Proper estate planning can minimize the potentially devastating effects of the gift and estate tax.

by Mark V. Pettinga

Illustration by Norman Rockwell

With the dawn of the Clinton administration come proposals for increased taxes. Although some Americans are proclaiming their willingness to "pay their fair share" to rescue the country from a perceived financial disaster, few, if any of us, want to "contribute" more than we must. Much of our attention is directed toward the ever-increasing income tax burden. Far less attention is given to the truly confiscatory gift and estate tax.

The intent of this article is to raise our readers' awareness regarding gift and estate taxes in general and, more particularly, the awareness of those who own closely held businesses. It is vital that owners of closely held businesses consult their accountants and attorneys to find out how they can minimize the potentially devastating effects of the gift and estate tax.

Americans are well aware of how much income and Social Security tax we pay every paycheck. Not surprisingly, many of us are concerned about the proposed income tax increase. The combined increase in income, Social Security, and Medicare taxes could bring the effective top marginal tax rate to 43 percent.

In contrast, the gift and estate tax system is relatively unknown. It comes into play when: (1) an individual transfers within one calendar year assets exceeding $10,000 in value to someone other than their spouse, and/or (2) an individual dies with a gross estate of at least $600,000. Most Americans are not positioned to make annual gifts of $10,000 or more, so there is a lack of national attention to the gift tax. The estate tax, on the other hand, will apply to more of us than we might expect.

Many "middle-class" Americans have estates exceeding $600,000. An unmortgaged home, a bank account or two, a few investment securities, and life insurance proceeds can quickly push the "average" American's estate into the minimum applicable estate tax bracket of 37 percent. This is all the more frightening when you consider that the estate tax brackets continue upwards to 55 percent. In addition, some of us who followed sound advice and saved for our retirement will face an additional 15 percent excise tax on "excessive" retirement plan funds. This brings the marginal tax rate on part of some estates to 70 percent.

Owners of closely held companies and their families are particularly at risk from the estate tax. Many such companies are run by two, or possibly more, family generations, and much of the family wealth in the form of company stock is likely to be in the hands of the eldest shareholder, who most frequently is the company founder. The all-too-often unfortunate result is that the family business must be sold to satisfy the estate tax bill when the business owner passes away. A business is destroyed, and our economy loses a once-productive employer and provider of goods or services.

Many closely held businesses can be preserved beyond the death of a founding shareholder if proper estate planning is in place. Attorneys, accountants, and financial advisers can work together to help construct an effective plan for transferring the family-owned company from one generation to the next. Estate taxes, possibly

continued on page 102

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A Unique Cookbook

to give you health for the zest of your life.

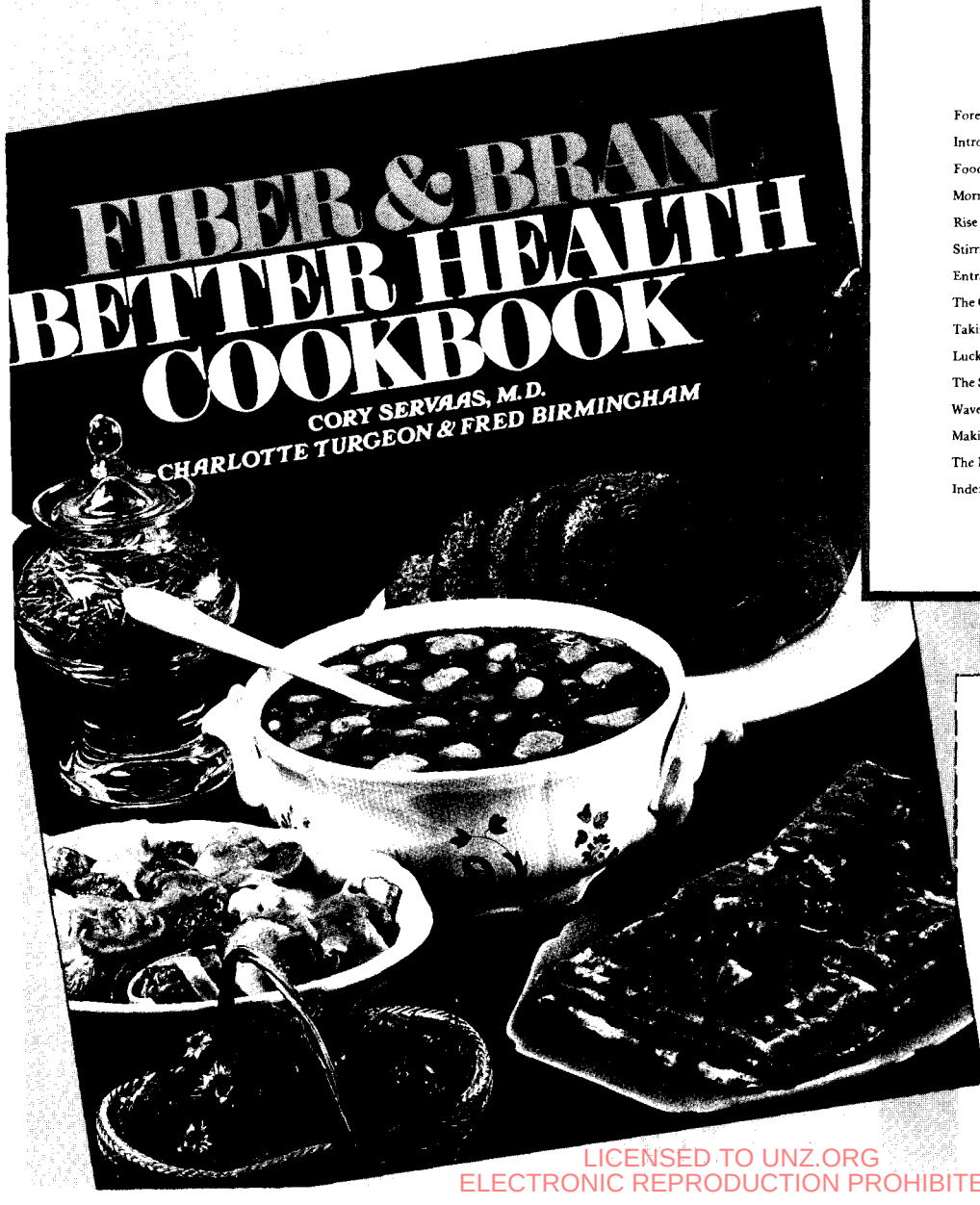
Sound the tocsin! . . . Now you can have it both ways! Enjoy frivolous dinner parties and tasty, attractive dishes every day, but still avoid the pitfalls of fiber-depleted diets, which are becoming a matter of serious medical concern.

Beat the timbrel! . . . There are 334 newly created and tested recipes in this handsome, hefty 8″ x 10″ tome for gourmets who now may have their cake and eat it too, dietwise and nutritionwise. And just plain wise in the arts of proper eating.

Pluck the harp! . . . Take a full measure of today's new scientific thinking on fiber in your diet, boil it down with common sense, and warm it with the flame of creative cookery. Here you will find wonderful ways to combine high-fiber foods in meals that will please the palate, placate the purse, and reward you with true *joie de vivre*.

Special feature . . . Eight full-page art reproductions in color. Artists include: Thomas Hart Benton, William Mason Brown, Salvador Dali, George Henry Hall, Paul Gauguin, Jean Francois Millet, Claude Monet.

Don't miss out on . . . Foreword by Dr. Denis Burkitt, an internationally recognized high-fiber authority.



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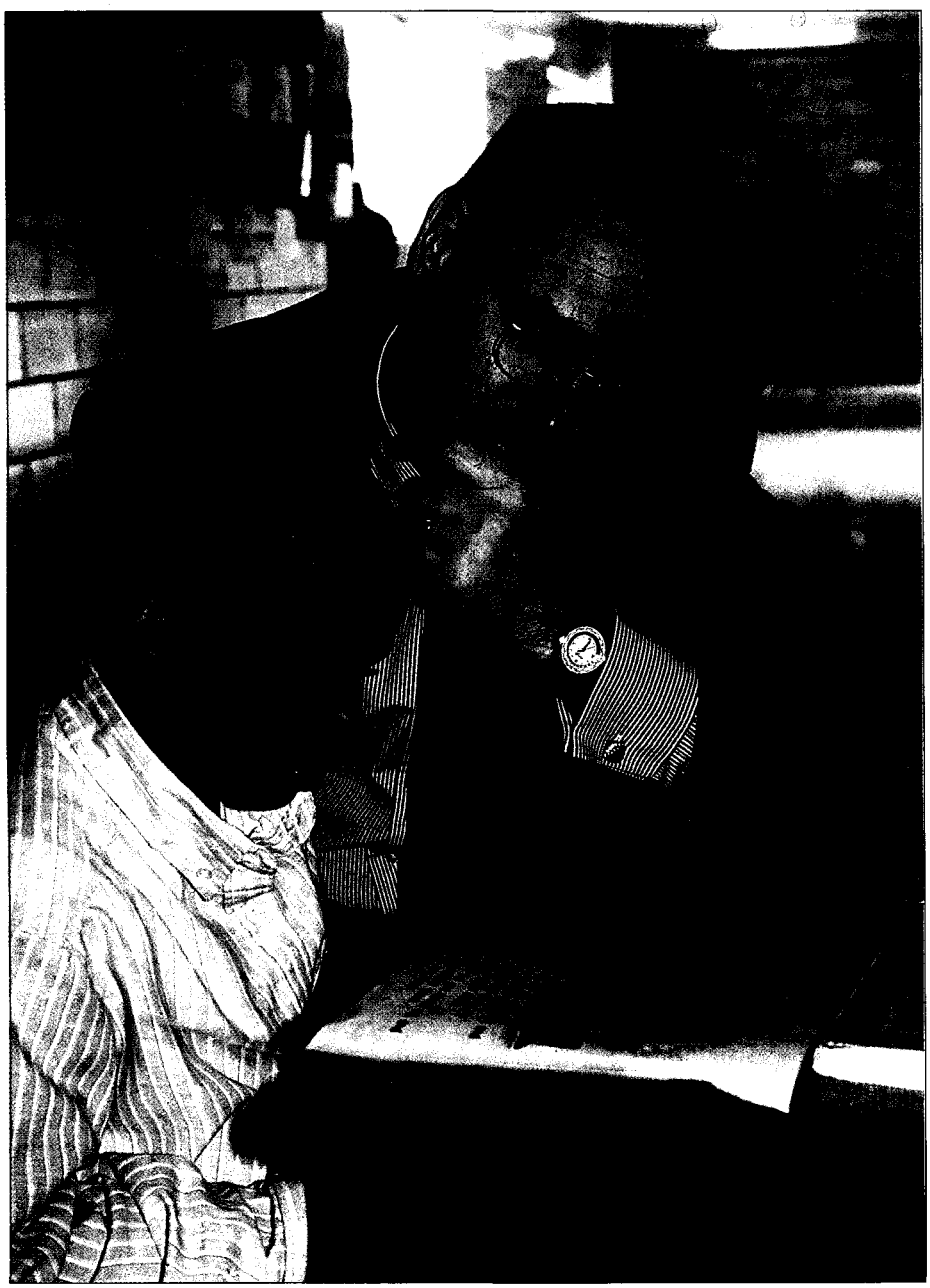
HARRY SMITH: MAN WITH A MISSION

Co-anchoring "CBS This Morning" only begins the day for this prize-winning journalist and tutor of young children.

by Cory SerVaas, M.D.



Part coach, part reading tutor and part cheerleader, Harry Smith spends several hours a week with students like Tyrone Robinson. The lessons are basic, but the progress is dramatic. "Any of us can make a difference," says Smith.

A letter from Harry Smith soliciting a contribution for Central College in Iowa piqued my curiosity. Why was my favorite "CBS This Morning" co-host raising money for this little Iowa college? My goodness! As I read further, the letter explained that he's an alum. But why had this urbane, sophisticated, man-of-the-world fellow named Smith chosen little Central College in the middle of Iowa? When I went to school there, most of the out-of-state students had long Dutch-sounding names.

The school, long supported by the Reformed Church of America (Dutch Reformed as in Marble Collegiate Church and West End Collegiate Church in Manhattan), attracted trustees' children from New Jersey, New York, Wisconsin, Michigan, and other spotty Dutch enclaves where the early Dutch Reformed Churches had survived. Central's president recruited Dutch Reformed Church members' children with generous scholarships and work grants. Many of them were preministerial or premed students with missionary service in mind.

Harry Smith just didn't look like your typical Central College alum . . . and with a name like Smith, how had he been recruited for Central College?

I visited him at the CBS studios to find out.

"This is the newsroom, and we keep in touch with all of our foreign bureaus over there," said Harry, who was a most gracious host, welcoming us to his on-camera workplace where he labors from 7 to 9 o'clock five mornings a week to bring us the news. "And this is where Dan Rather comes from every night."

Although his day began at 4 a.m., he was now relaxed and chipper as we settled down to talk on the sofa in his small, rather Spartan office.

First question: A Smith goes to Central in Iowa? How did that happen?

He surprised me by saying, "I am a Dutch kid. All of my grandparents are of Dutch ancestry. I grew up in the Reformed Church, and I played football in high school. I had a lot of scholarship offers but decided to go to Central because it seemed small and safe. It was great, the perfect place. I was there for four years. I majored in communications and theater and social science. I really thought I was going to the seminary or maybe to

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graduate school. But I didn't have the money to do either. So I worked for years in radio instead. From radio I went to public television and from there to the CBS affiliate in Denver. Then the network hired me to work as a correspondent for the 'Evening News.' After a couple of years, they brought me to New York to do this show, which as of today, I have been doing for five years."

After congratulating him on this milestone, I wanted to know how, with all the Dutch grandparents, he became a Smith?

"Easy," he said. "When great-grandfather Smit, S-M-I-T, landed at Ellis Island and they asked his name, he said Smit, and they put an 'H' on it, and it has been Smith ever since."

"Now you were thinking of becoming a minister and you went to Central because you knew of it through your church?"

"Yes, and I knew about you long before you knew about me, because people who did well at Central—we sort of put those people

Three native Midwesterners gather for a "photo op" in the Big Apple. Smith and his *CBS This Morning* co-anchor Paula Zahn both hail from Illinois (he from Lansing; she from Naperville). *Post* editor Cory SerVaas is an Iowan-turned-Hoosier.

Harry joins teacher Ann Chase for a class picture at P.S. 84. The kids are aware of, but not overly concerned with, Smith's "other life"—the one that has him covering wars and interviewing heads of state. The students like him best as their reading tutor.

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Three-year-old Jake finds broadcasters' hours to his liking. Mom (CBS sportscaster Andrea Joyce) is home in the morning hours, and Dad pops in after lunch. The Smiths met as co-anchors of the noon news in Denver.

on a pedestal. And gosh, I've known about you forever."

"Because of *The Saturday Evening Post* and the children's magazines?"

"Oh, absolutely," he responded. I was glad we had sent complimentary subscriptions to Central's library.

"Tell me about your days at Central. You're out front helping the school . . . I'm impressed."

"Well, let's just say the best thing about it was for me to go there. I remember the premium they placed on learning. Here's the place . . . have the run of it . . . . You can learn and sing and act and play football and all those things. So I tried everything I could get my hands on. I even went to Taiwan one summer to teach English.

"Kids come to me now wanting to know how to become a journalist or how to get into the news business. I always tell them to get a liberal arts education, because it gives you a taste of a lot of different things. And that's what ultimately serves you well."

Post: I remember there was no smoking on campus at Central. But when then-Princess Julianna came

New Yorkers may care about the Trumps, but they don't care about the Smiths, says Harry. His favorite NYC haunts include the opera with Andrea and the museum with son, Jake.

"So many kids ask me how they can get into the news business. I always tell them, 'Get a liberal arts education—know a little bit about a lot of things.' "

It was Smith's writing ability, not his good looks, that caused CBS to offer him a contract. His version: "They didn't say, 'Well, gee, you've got a lot of hair . . . .' "

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during the war, she smoked—a long cigarette. And everyone in the girls' dormitory was shocked she was smoking. Of course, we didn't dance, either. Do they still not dance?

Smith: They danced when I was there.

Post: That's good.

Smith: Yes, we found all kinds of sins to commit when I was there.

Post: Having gone to Central and being of Dutch Reformed background, you must have some pretty strong convictions about how to make this world a better place before you go on.

Smith: I do. I'm now into my third year of volunteering in the New York public schools. Every Tuesday, I go up to 92nd Street, climb three flights of stairs to Ms. Anne Chase's first- and second-grade classes, where I am a reading tutor for her students. Mostly second graders who really need help.

I didn't want to do something symbolic. I wanted to do some of the real hands-on, make-a-difference kind of work. I said I want to work with little kids because so many of the older kids are gone by the time they are in junior high school. The things that have affected their lives are so dramatic, I don't have the expertise to help turn that around.

Post: You went through an orientation process?

Smith: Four long, drawn-out seminars, and then they assigned me a school. And it's really great. Any of us can make a difference with only a couple of hours a week. I can sit with these kids, 20 or 30 minutes each, and they are better readers by the time they are at the end of their second year. Only because I am with them as their coach, their cheerleader, their giant piece of reinforcement that walks through the door once a week. They know I'm going to be there, that I'm going to cheer them on, that I'm going to be so unbelievably excited.

Post: And they probably watch you every morning.

Smith: Well, you know what! When I first started doing it, none of these kids had a clue. They didn't know anything about who I was or what I did. It was interesting because at first I think there was an attitude among a lot of them like: "Who is this guy?" "Why is he here?"

But when they saw that I was there

Like many successful folk, anchorman Smith and President Bill Clinton share a characteristic: Both are workaholics.

Smith's years as a Colorado journalist educated him well on environmental issues—a favorite topic of Vice President Al Gore.

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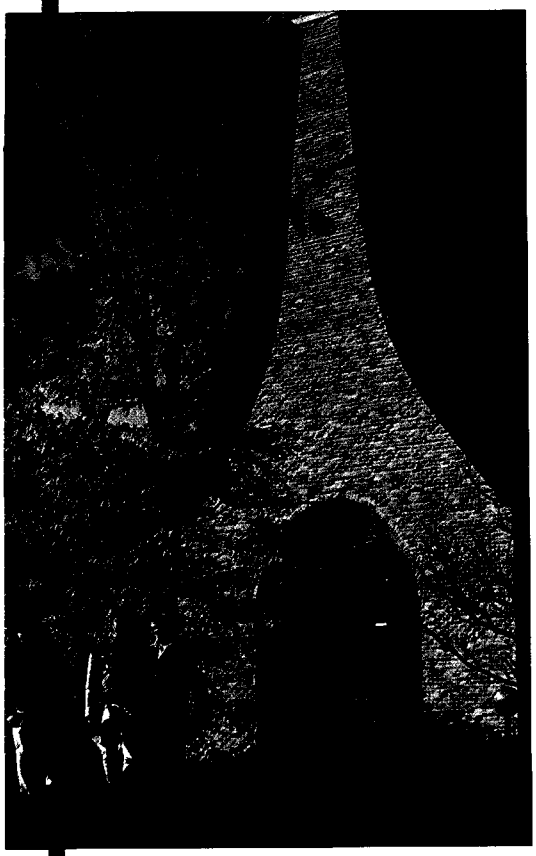

Smith aspired to a career in the ministry when he enrolled at picturesque Central College. A "stopover" in broadcasting proved to be permanent when he moved from radio to public television to network TV news.

week after week, they really began to warm up and to work hard. Especially at that age, these kids are so hungry, so hungry for direction, so hungry for information.

I asked the teacher about it. She said [that] so often with many of these children, there's so little consistency in their lives, and when you continue to show up and show up, they'll respond to it. It's really, really great. We're not creating geniuses here. We're just helping some kids read a little bit better than they would otherwise.

Post: Is this mostly a minority class in Harlem?

Smith: It's a mixed school. Some kids are from the neighborhood, and some are bused in from H—, basically. A lot of the kids' lives bear no resemblance to anything most of us could possibly imagine.

Post: If we wanted to ship our magazines—you know we publish seven children's health magazines, *U.S. Kids*, a *Weekly Reader* magazine—and include a stethoscope and instructions on how to take blood pressure, would it be okay? We have taught third graders to take blood pressure.

Smith: Oh, sure. Just send them to me in care of CBS News. That would be good. Absolutely.

The name under his Central College yearbook picture says "Smith," but that's only because Ellis Island officials added a letter when Harry's great-grandfather Smit immigrated to the States.

Post: Do you want to stick with second graders?

Smith: Yes. I don't want to move up with the class. I've seen everything there is to see just by sitting in that hallway for two years and more.

Post: I would like to have pictures of you with the second graders. Could we do that?

Smith: Yes.

Post: It might cause more people to do the same thing.

Smith: You never know. It certainly wouldn't hurt. For a long time, people were saying you've got to tell others about it. But this is what I need to do and want to do. I'm not doing it for anybody else, I'm doing it for me. I'm doing it for the city I live in.

Oh, I've mentioned once or twice what I am doing. I guess I'm changing my attitudes about it a little, just because people say "gee, you must be the busiest person in the world and blah blah blah . . . If you can find time, maybe I could."

Post: How often do you do this?

Smith: Once a week, on

Smith's prowess on the college football field led to several scholarship offers. He chose Central because it seemed "small and safe." (He's #54.)

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Tuesday, 12:30 to 3:00.

Post: Do other classes come to see what you are doing?

Smith: No, no. It's just me, a little chair, a little kid, and away we go. We build sentences. We take five words off the work board and we put them down on an empty desk and we talk about what we can make out of these five words. We build sentences and we learn how to read books. It's all basic stuff.

Post: While you are doing it, you could also teach them about their body: pulse, heart, learn the word, how to spell, so that when it comes to drugs, they will know the physiology. Doctors don't take time to get out and do what you are doing.

Smith: Yes, I hear what you are saying.

Post: Is there anyone you have not had the opportunity to interview on the morning show that you would really like to interview? And what would you ask him or her?

Smith: Johnny Carson. I'd ask him what it cost him personally to stay so good for so long.

Post: How do you prepare for a morning broadcast, and how is it determined who will interview various guests?

Smith: I'm always in preparation. Sometimes it seems all I do is read. The more information I'm able to ingest, the better I am at my job. The producers of the show determine who interviews whom.

Post: What do you consider your worst and best interviews?

Smith: Five years ago when the show first started, I interviewed Yasir Arafat, head of the PLO. I wasn't ready for the big leagues. He's never an easy interview in the first place. But my lack of seasoning really showed.

On the other hand, I've never been completely satisfied with any interview I've done. If there is a best interview, it was the time I sat down with Andrew Young, Julian Bond, Ralph Abernathy, and Joseph Lowry in the Ebenezer Baptist Church in Atlanta to talk about Martin Luther King, Jr.

Post: Do you feel that the national news media are doing any better at focusing on substance, or will it continue to [focus on] cats on the White House lawn and gays in the military? Do you think the media are part of the problem?

Smith: Sometimes we get obsessed with the minutia of the day, but on the whole I think we do a good job.

Post: Our magazine is very much oriented toward physical fitness and preventive medicine. We'd like to know how you, as an ex-athlete, and your family stay fit, and if diet plays a part.

Smith: Andrea goes to a gym. I jog. Our eating habits have changed dramatically in the past few years.

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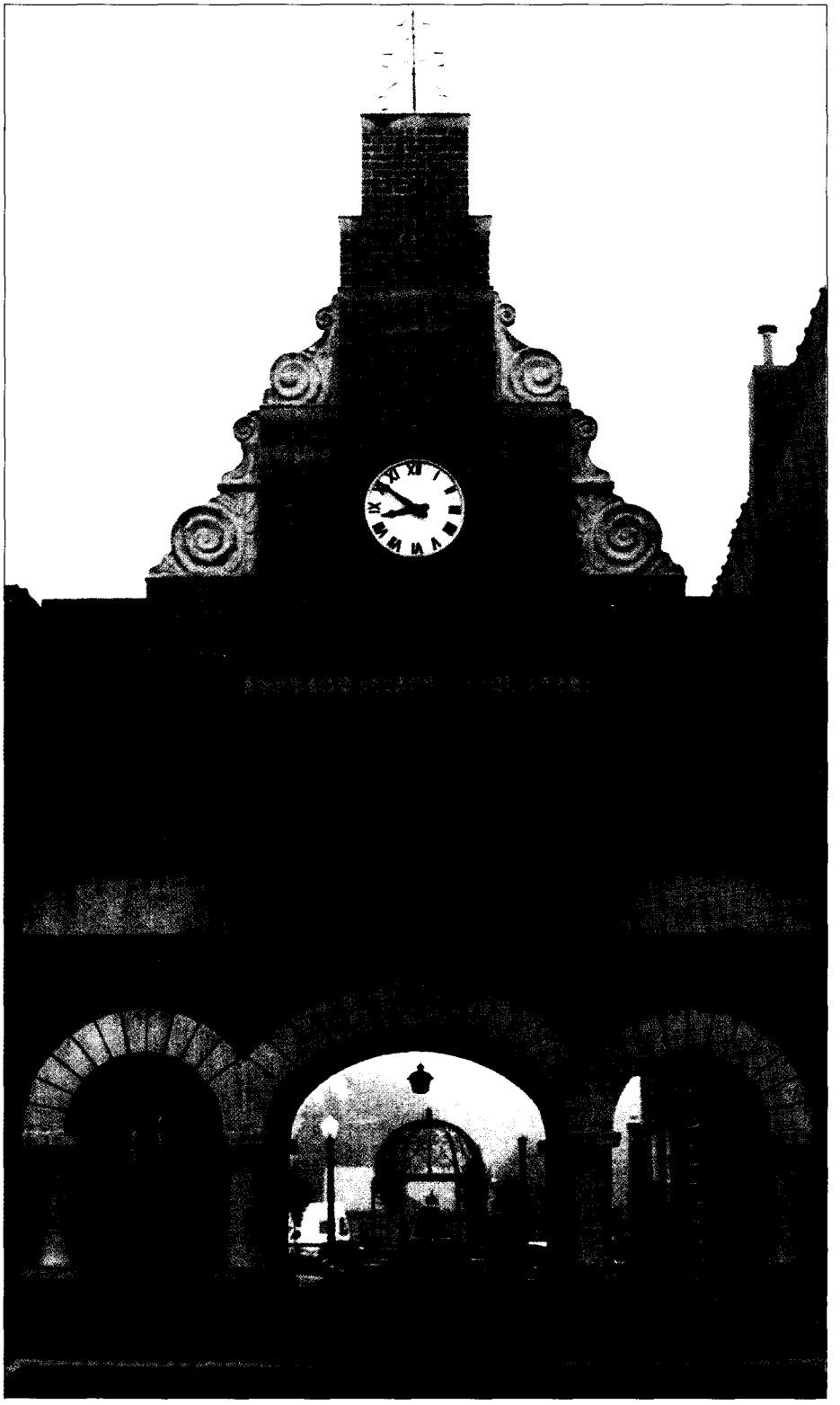

Students at Central College enjoy Pella's famous Klokkenspels (or glockenspiels) housed in the Franklin Place Arch. The pedestrian mall was dedicated at the 50th anniversary of the Pella Tulip Festival in 1985.

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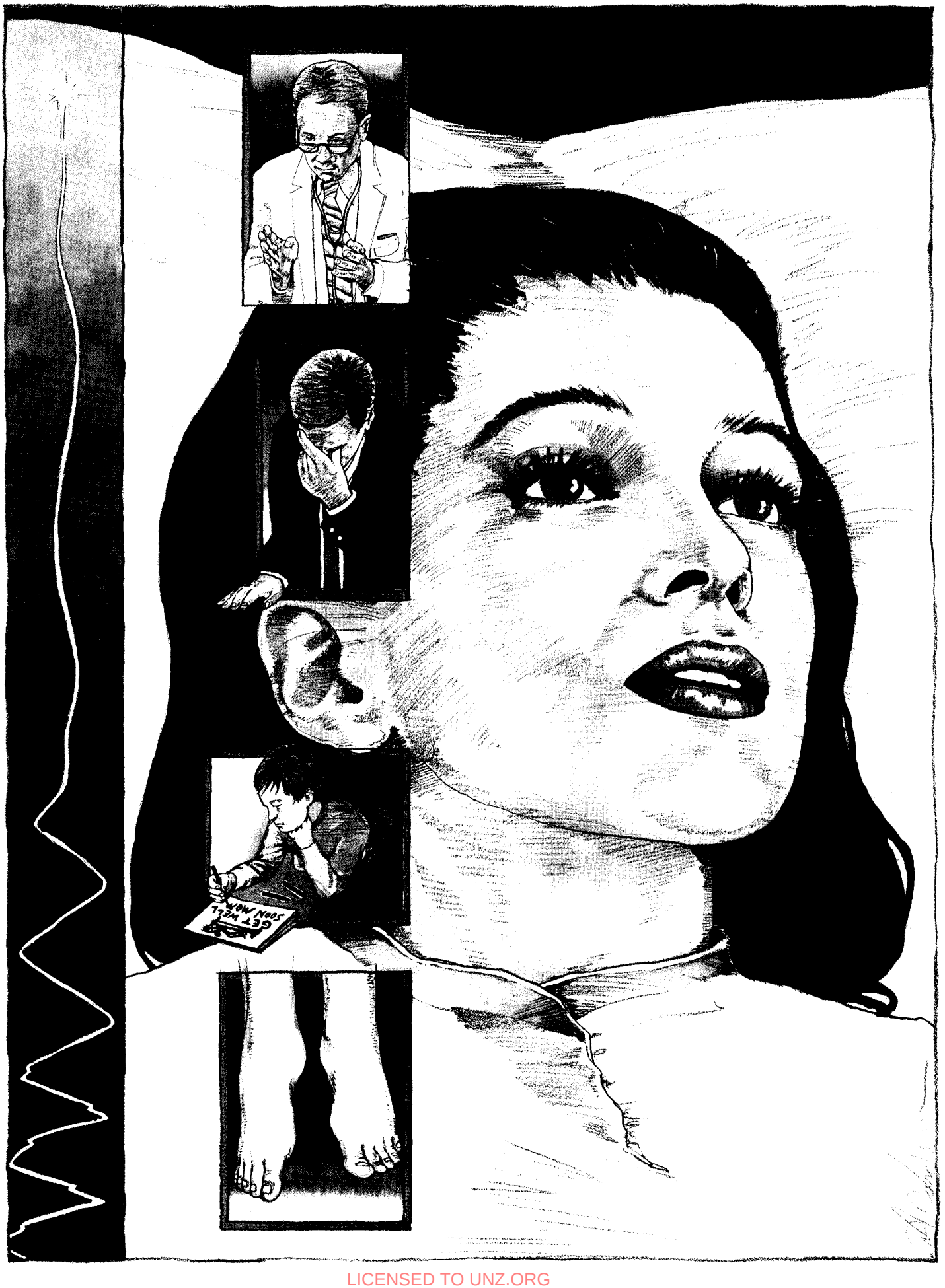

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"MOMMY, WHY DON'T YOU HUG ME?"

A slight weakness in her legs rapidly evolved into a life-threatening illness for the attractive young mother of two.

by Lawrence Martin, M.D.

Illustrated by Frederick H. Carlson

Thirty-five-year-old Naomi Benedict was sitting in a chair at home, recovering from the flu, when she felt a sudden tingling in both legs. She stood up to stretch, lost her balance, and promptly fell to the floor.

The maid ran in from the kitchen. What was wrong? Mrs. Benedict said the only problem was her legs, they felt weak and tingly, as if their circulation were cut off. Otherwise she felt fine. The maid helped her stand up, climb the stairs to the bedroom, and get into bed.

It was two in the afternoon on Tuesday, March 7. Mr. Benedict, an attorney, was at work and their two young children were in school. At three o'clock she was to attend the city's Arts Council meeting, her first time out in a week. Instead of getting dressed, she lay in bed, unsure what to do.

She called her husband. Julian Benedict thought her leg weakness was probably from the flu and from sitting too long in one position. He suggested she call Dr. Cooper and skip the meeting.

Dr. Cooper, one of the town's leading internists, knew the Benedicts well, as both their physician and friend. He advised her to stay in bed. If she was not substantially better in the morning, after a good night's sleep, she should come to his office.

The next morning I was making rounds in the intensive care unit when Dr. Cooper phoned.

"Larry, I've got Naomi Benedict in my office. You know who she is, don't you?"

"Sure," I said, "her husband is Julian Benedict, right? I've seen their picture in the magazines." I did not know them personally, but I knew of them. At the time he was a rising young lawyer, famous after his defense of a business tycoon charged with murder. When his client won acquittal, Julian Benedict's name was all over the papers. At age 39, he was a legal star.

I was aware of Naomi as a young socialite and heiress to a family fortune made in the steel industry. Like many young and wealthy women, she was active in prominent charities, one of which made donations to Memorial Hospital. She and her husband were also well known, at least locally, because of their home. "La Maison Magnifique," so dubbed by an overly enthusiastic editor, was featured in the city magazine four months earlier. The Benedicts had spent a fortune decorating an old French chateau-style mansion into something that, even by European standards, was stunning (at least from the pictures; I have never been inside). Naomi's college degree was in art history, and she had orchestrated the entire project.

"Well, I've been treating her for a viral gastroenteritis the past week," Dr. Cooper continued. "She had the flu with some diarrhea and was getting better, at least until yesterday. She had a little leg weakness yesterday and this morning can hardly walk. I'm not sure, but it might be progressive. She also has some diminished breath sounds. I did a vital capacity (a measure of lung function) in the office, and it's down to about 70 percent of predicted. Larry, I'm worried about her. I'd like to put her in ICU, if you have a bed."

Dr. Cooper is known for good medical judgment, so if he worries about a patient, I do, too. "Of course," I said. "We'll get a bed ready for her. When do you think she'll be here?"

"Well, Julian's with her, and he'll bring her down to the hospital. With her difficulty walking, it'll take them about half an hour."

"OK. We'll be ready."

A few minutes later, Harold McAllister, Memorial's director of neurology, stopped by. Just past 40, tall and aristocratic in bearing, Harold is a neurologists's neurologist, which is to say he regularly consults on the rich and famous. Even in the area of CAT and magnetic resonance scanners, neurologic diagnosis is an art based on thorough history and detailed physical examination. Dr. McAllister is an artist.

"Hello, Harold, what's up? Whom are you here to see?"

"No one just yet. I understand Naomi Benedict is being admitted soon."

"Yes, that's right. Did Dr. Cooper call you also?"

"He left a message with my secretary to see her right away. When do you expect her?"

"Within the hour. I just talked to Cooper a few minutes ago."

"OK. Would you please page me as soon as she arrives?"

"Sure."

A few minutes later, the chief of the Department of Medicine walked in. He pulled me aside from rounds to speak privately.

"Larry, Naomi Benedict is being admitted to ICU. She apparently has . . ."

"I know," I interrupted, somewhat surprised by this unexpected visit from my boss. "I spoke with Dr. Cooper a while ago, and Harold McAllister was just here also."

"Well, I just came to tell you about Julian, her husband. I don't think you know him. He's on the hospital's board of trustees. (Dr. Cooper hadn't mentioned this.) He's one of the nicest guys you'll ever meet, a tiger in court, but outside the courtroom he's a real gentleman. Naomi works on the hospital's auxiliary. I can't tell you how much money she's helped raise

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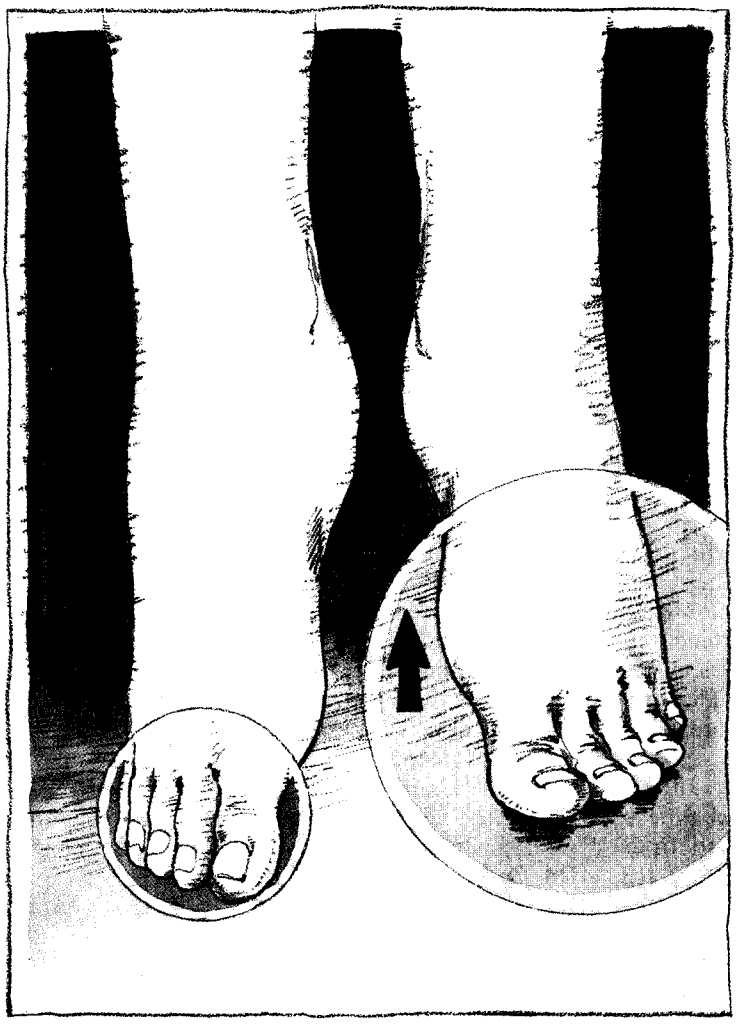
for Memorial. I know them both. Don't be intimidated by their wealth or position. They are down-to-earth people. She, especially, is a doll. I sure hope she's OK. Maybe Cooper is just being overcautious. Anyway, call me if you need assistance of any kind. We want to do everything necessary to help her."

I wanted to reply that "everything necessary" is what we do for all our patients but instead just thanked the chief for his well-intentioned advice. Some degree of anxiety is natural when VIPs (or their relatives) become patients. Socially prominent people, including politicians, business leaders, and movie stars always expect (and usually receive) special treatment. The difference is in nuances of service, not in basic medical care. In fact, doctors sometimes have to be careful not to let "VIP care" affect sound medical practice. A desire not to intrude, not to bother, can sometimes inhibit doctors from doing an important test or procedure, although this is less likely to happen in ICU. I learned long ago that every patient, whether dope addict or corporation president, or the rich wife of a hotshot trial lawyer, want (and deserve) the same thing: good medical care delivered in a friendly and compassionate manner.

A few minutes later, the swinging doors to the intensive care unit opened, and an attendant ushered in Mrs. Benedict in a wheelchair. Julian Benedict walked beside her. From TV and magazine photos I recognized them right away, although Julian appeared shorter than I had imagined. A three-piece business suit covered his stocky, muscular frame. Clean-shaven, tie perfectly knotted, he appeared ready to go to court. Naomi, also smartly dressed in street clothes, carried a purse on her lap.

Unlike most patients admitted to ICU, she was fully alert and in no distress. My first thought was that perhaps she didn't need to be in ICU, that she might be more comfortable in a private room in one of the hospital towers. My second thought was that the towers are not equipped to closely monitor patients, and if Dr. Cooper wanted close observation, she probably should be in ICU.

The ICU nurses went right to work. Because the Benedicts had bypassed normal admission procedures, they sent Mr. Benedict to the admitting office to provide insurance information and sign some papers. Then they took Mrs. Benedict into room two and exchanged her street clothes for a hospital gown. After a few minutes, Emily, one of the RN's, came out to get a bed scale. She gave me a knowing smile.



"Why the look?" I asked.

"Anne Klein skirt and blouse? Gucci shoes and purse? Can you believe it?"

I acted dumb. "Is that fancy?"

A rhetorical question, at least for Emily. She changed her expression to show that I was quite out of touch and returned to Mrs. Benedict's room.

Because Mrs. Benedict could not stand up, the nurses measured her height as she lay supine (five feet five inches). Next, they recorded temperature (normal), blood pressure (125/72), heart rate (105 beats per minute), respiratory rate (18 breaths a minute—normal), and skin turgor (normal). They hoisted her on a stretcher over the bed to obtain her weight (129 pounds) and attached EKG monitor leads to her chest. From that moment her heart rate and rhythm were continuously displayed on a bedside monitor.

When the nurses finished, I paged Dr. McAllister and, accompanied by Janice Dover, one of the ICU interns, went in to see our new patient. Even without the fancy clothes, she was so different from our usual intensive care patient (elderly or debilitated or acutely ill). Here in ICU was a very attractive woman: light complexion, brown hair combed straight back, little makeup, with the poise and bearing of a top fashion model. Even in the bare cloth of a hospital gown, without jewelry, she looked elegant, not unlike Jackie Onassis at a similar age.

"Mrs. Benedict, I'm Dr. Martin, and this is Dr. Dover. I run the ICU, and Dr. Dover is one of our interns. Dr. Cooper called me when you were in his office and told us something of your problem."

She smiled, then spoke with a mixture of embarrassment and concern. "Hello. I feel so foolish being here. Do you really think the intensive care unit is necessary? I don't feel sick."

"Well, Dr. Cooper is worried about your sudden weakness."

"I know. I just can't walk. I feel so helpless. What do you think it is?"

"We don't know yet. He wants us to watch you for a day or so and run some tests. If there is no progression of the weakness, you'll go home or to another part of the hospital to recuperate. He's also asked the head of our

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neurology division to see you. That's Dr. McAllister. He will be down in a few minutes."

"Can my husband come in for just a minute? I want to tell him not to wait around. It's not necessary."

I checked her vital signs from the nurse's records. They were all normal except for the slightly fast heart rate. "Sure, I'll go see if he's through in the admitting office."

Julian returned to ICU and went in to see his wife. He came out five minutes later and announced he was leaving the hospital for a few hours. Apparently she had insisted that he go to work and come back in the afternoon, when more would be known about her condition. There would be no problem with the kids because the Benedicts had a full-time housekeeper.

About this time Dr. McAllister returned to ICU. Consultants on new admission don't usually appear until the intern has examined the patient, but in this case Dr. McAllister was asked to get involved right away. He apologized for "intruding" so soon and suggested we interview her together, then let him do the neurologic exam. This approach was reasonable because it would obviate repetition of her medical history.

Dr. McAllister introduced himself and began eliciting her story, the outline of which is related above. Mrs. Benedict had no trouble speaking or recalling events leading up to hospitalization. She impressed us as bright and articulate and, for all the press hype, remarkably free of affectation, an ordinary (if rich) human being who wanted nothing more than to get better and go home. On a personal level I felt sorry for her.

Accustomed to all the drug addicts, alcoholics, and noncompliant patients we routinely see, as well as those in coma or serious distress, her presence in ICU seemed anomalous. She was not even sick. I couldn't get the idea out of my head: What is she *doing* here? Her weakness could progress, but in the scheme of things, why should it? She hadn't done anything "bad" to justify a serious illness. No drugs, no alcohol, no promiscuity.

But, of course, these were foolish thoughts. There are many more diseases than those brought on by self-abuse. I reflected on Erich Segal's *Love Story* and its depressing ending: innocence and happiness dashed by cruel fate. Mrs. Benedict was innocent. She had caught a virus and developed muscle weakness. Now, she could crash just like any other patient with a disease.

Another question from Dr. McAllister interrupted my ruminations. "Mrs. Benedict, did you run a fever when you had the flu?"

"I took my temperature only twice. Once, at the beginning of the flu, it was 101. Two or three days later it was down to 100. I haven't taken it since, but I think I'm recovered from the flu. At least I feel better."

"Before you developed leg weakness—that is, before yesterday—did you have any numbness or tingling of your arms or legs?"

"No. The weakness and tingly feeling came on at the same time."

"Have the numbness and tingling persisted?"

"Yes. My legs have a tingling feeling now, like they're still asleep."

"But you have sensation in your legs? You can feel the bed sheets?"

"Yes, but my legs feel almost like they're not part of me, like they're still asleep."

"Have you had any trouble breathing?"

"No. Well, wait a minute. Yesterday I did feel a little short of breath after climbing the stairs. And this morning, getting into the car, I guess I was a little winded, but that's all. It's probably because I feel so tired."

"Do you smoke?"

"No, not at all."

"How about your husband?"

"Smoke? No, Julian doesn't smoke either."

"Have you ever had any respiratory problems, pneumonia, asthma, any lung trouble before?"

"No, nothing. This is actually the first time I've been in the hospital since Kevin (their younger child) was born. That was six years ago. In fact, I felt great until last week."

"Do you do any regular exercise?"

"Yes! Doubles tennis. Twice a week."

"When was the last time you played?"

"Two weeks ago. I haven't played since I got the flu."

"There was no falloff in your game? I mean, the last time you played, did everything seem normal in your game?"

Here she gave a little laugh. "Yes. I mean, we lost, but I felt fine."

"Other than the weakness in your legs, have you noticed weakness anywhere else?"

She opened and closed her fists a few times. "No, I feel fine everywhere else."

"Has your weakness increased since

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yesterday? Is it harder for you to walk this morning than when you first noticed the weakness?"

"Yes. Yesterday, even after I fell on the floor, I could walk a little. This morning my legs were weaker. Julian had to practically carry me into and out of the car. I could not make it by myself. Now I couldn't walk if I had to."

"Have you had any problem with your period? Is it regular?"

"Yes."

"Any history of kidney or heart disease?"

"No, none."

"How about arthritis?"

"No."

"Do you take any medication?"

"No, only what Dr. Cooper prescribed last week."

"What was that?"

"Erythromycin (an antibiotic) and some Donnatal (an antispasmodic for the diarrhea)."

"You've taken no other drugs the past few months?"

"Oh, an occasional aspirin. But nothing else."

"Have you eaten anything rotten or that tasted rotten in the past few weeks?"

"No. Nothing. Do you think this could be food poisoning?"

"Probably not. Botulism—and I *don't* think you have botulism—can sometimes present with progressive weakness."

There were several more questions about possible exposure to insect spray, toxic chemicals, and other people with similar afflictions, but the answers were all negative. In essence, her history was straightforward: a healthy and active woman, flu-like illness for about a week, development of abrupt leg weakness, and progression during the ensuing 18 hours.

Next came the neurologic exam. Dr. McAllister was a marvel to watch as he tested her sense of smell and taste, eye movements in all directions, strength of muscles from neck to toes, reflexes, and numerous other aspects of nerve function. His exam was meticulous, thorough, and kind. He explained any poke or prod that might cause some discomfort. (He did not concentrate on her heart, lungs, or abdomen, as these organ systems are not part of a neurologic exam; Dr. Dover and myself would return to check these areas.)

Apart from her lower extremities, the neurologic exam was "unremarkable." Her legs revealed the problem. Normally, we can push our toes down (a motion called dorsiflexion) with great strength, as when pushing against a bed board or standing on our tip toes; Mrs. Benedict could not push down at all. While lying flat we can lift our legs into the air and hold them up for at least a few seconds. She could not lift her legs even a fraction of an inch. We can easily take one leg and cross it over the other, from knee to ankle. This, too, she could not do. All she could accomplish with either leg was a slight rolling motion on the bed sheet.

She had sensation in both legs and could feel Dr. McAllister's warm hands and the gentle prick of his safety pin. Also of diagnostic importance was the absence of muscle reflexes in her legs. Normally there is a reflex jerking of the leg if the knee is tapped with a rubber hammer. Her legs didn't budge.

After the history and exam, which took about an hour, we thanked her and went to the nurses' station.

"What do you think?" Dr. McAllister asked Dr. Dover.

"Well, she can't dorsiflex (push down) her feet, so there's weakness there. It looks like a primary motor weakness of the lower extremities."

"Exactly," he commented. "And coming on a week after a viral illness, it makes you think of one particular diagnosis."

"Guillain-Barré syndrome. The weakness began in her feet and seems to be progressing upward. Now her thigh muscles are weak. I'm also a little worried about her breathing. Larry, I didn't detect any respiratory muscle weakness, but that can happen if this progresses any further. We should check her vital capacity several times a day. Until we see which way she's going, I want her to stay here. In the meantime, we'll need to do an LP (lumbar puncture) and an EMG (electromyogram) to help secure the diagnosis."

• • •

George Guillain and Jean A. Barré, two early 20th century French neurologists, were among the first to describe inflammation of the peripheral nerves leading to paralysis. They recognized that the paralysis occurred most commonly after a respiratory infection. Today the eponym "Guillain-Barré" is widely used for the syndrome of postinfection paralysis.

In GBS, myelin sheaths covering the motor nerves are damaged. An analogy is the rubber sheath around a thin piece of metal wire that, when damaged, prevents the wire from transmitting electricity. In GBS, the myelin sheath is damaged and the nerve does not transmit impulses. The specific mechanism is unknown, al-

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though it is probably related to antibodies generated by the infectious agent (usually a virus).

GBS afflicts men more than women and can strike at any age. The most benign cases show only minor muscle weakness and then remit altogether. The most severe cases go on to total paralysis. If the myelin sheaths regenerate (which happens most of the time), and the patient doesn't die from acute respiratory or cardiac failure, the prognosis for recovery is good. Joseph Heller, the celebrated author of *Catch 22*, developed severe paralysis from GBS and recovered.

GBS classically presents an *ascending paralysis*, meaning it starts in the legs and progresses up the body. Atypically, paralysis can start in the head (with facial and eye muscle weakness, for example) and *descend*, or start in the middle of the body (arm weakness), and travel both ways. The worst fear is paralysis of the respiratory (breathing) muscles. To have some idea what this type of respiratory failure is like, do the following. Stop breathing without "holding your breath." Instead, keep your mouth and throat open, but do not move your chest (rib) cage. Keep your chest perfectly still. When you can no longer do so, notice how much your chest cage moves as you take in the next breath. If you couldn't move your chest, you would asphyxiate in about four minutes.

A totally paralyzed patient cannot breathe because his chest cage doesn't move. Without movement there is no expansion of the lungs, and without expansion no fresh air can enter the blood. All totally paralyzed patients require artificial ventilation for as long as the paralysis lasts.

Examination of the spinal canal fluid—the clear liquid that bathes the spinal cord—can help secure the diagnosis of GBS. Spinal fluid is removed for analysis through a hollow needle inserted in the middle of the back at the level of the hips. (Reach around your back to the spine just between your hips. With the tips of your fingers feel the protuberances of the spinal column. In a spinal tap, the needle goes between these two protuberances.) A few drops of spinal fluid are removed and sent to the lab for analysis of protein, glucose, and cell count. A spinal tap is technically not difficult and is often done by house staff.

• • •

"I better do the spinal tap," said Dr. McAllister, "but it doesn't have to be done right away. Why don't you finish your workup, then call me? By the way, I met Mr. Benedict on his way out. I'll talk to him again when he comes back this afternoon."

Dr. Dover and I returned to finish the physical exam. Apart from the neurologic system, everything was normal. We also drew blood for routine tests and did the vital capacity measurement. Our exam and tests took about 45 minutes.

"I didn't get you candy because you're on a diet."

Afterwards I paged Dr. McAllister. He returned to ICU and obtained permission from Mrs. Benedict for the spinal tap. The major complication, he explained, is "post-spinal" headache, which occurs in perhaps 15 percent of patients.

While she lay on one side, he injected a local anesthetic into a small area of skin over the spinal column. In a few minutes the area was fully numb. He then inserted an .18 gauge spinal needle into the space between two vertebral bodies. The needle entered her spinal canal with a slight 'give.' Success. Out flowed crystal-clear spinal fluid. One . . . two . . . three . . . four cc's. The precious fluid was collected and the needle withdrawn. Mrs. Benedict reported no pain from the procedure.

"I'll check the lab results," he said, "and call Dr. Cooper to let him know how she's doing. In the meantime, please page me when Mr. Benedict arrives. By the way, were you able to get the vital capacity?"

"Yes. It's slightly low," I said. "Three point two liters. We also did an arterial blood gas, which is normal."

In four hours, we had accomplished a battery of tests and exams that would have taken much longer on the general medical ward. We also had made a tentative diagnosis and plan of action and set up a chart of items to follow her course: muscle strength of upper and lower extremities, vital capacity, respiratory rate, body temperature, blood pressure, and heart rate.

Those first few hours convinced me she was in the right place. Ascending paralysis can move fast. Doctors and nurses have to be prepared to move faster.

• • •

She went rapidly downhill. By four p.m., slightly more than 24 hours after the onset of leg weakness and six hours after arriving in ICU, she began losing strength in her arms. More ominous, her respiratory rate increased to 28 breaths per minute, and vital capacity fell to 2.1 liters. I met with Dr. McAllister.

"What do you think?" I asked.

"She's progressing, no doubt about it," he said. "I'm going to start plasmapheresis right away."

"Can that reverse such a rapid slide?"

"Sometimes yes, sometimes no. It's best if plasmapheresis is started before the patient ends up on a ventilator. The sooner the better. There was a large-scale study a few years ago on plasmapheresis in GBS. Something

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SUBJECT TO CHANGE—WITHOUT NOTICE

A woman's genes for change have hubby going to bed on the vanity and eating Minute Rice for breakfast.

by Maynard Good Stoddard

Illustration by Don Trawin

There's an old saying—so old, in fact, that not even I can remember it. No matter. It had something to do with the more things change the more they remain the same. The saying must have been based on our house. The truth is (and that's a switch in itself), our furniture gets more wear from being moved than it does from being used.

Remember the night I came home late, and so as not to awaken my sleeping beauty, I undressed by the light of fireflies romancing outside the window, tippy-toed over and collapsed on what should have been the bed? Only it was the vanity? And for the next three days I smelled like an Avon lady's sales kit in mid-August?

Well, the situation hasn't improved. Take the sofa. To save the wear and tear of moving, I'd put the thing on wheels if it weren't for motion sickness. Or the TV. If the wires would reach, I'd be out in the shed watching Vanna turn the letters, dear wife having exhausted every possible location in the house.

While seeing hubby search out the TV's new location gives her much enjoyment, the kitchen provides even more entertainment. Especially the old switcheroo in the cupboards.

Her finest hour comes with watching her married opponent reach for the bran flakes and bring out a box of Minute Rice. In his morning fog he doesn't discover the error until his selection has been raisined, sugared and milked—too late to waste on the dog. I tell you, gentle reader, there's nothing like facing a hard day's work on a hearty bowl of Minute Rice.

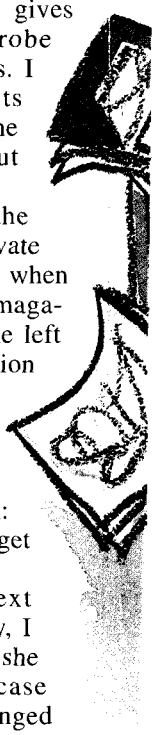
My Jubilee melons were nothing to shout about this year. How come? It's because I nourished them all summer with kitty litter instead of Miracle-Gro. And why would I do a stupid thing like that? It's because my dear wife dumped a sack of kitty litter into the bucket where I keep the Miracle-Gro.

"Maybe you can sell your melons as cucumbers," she said by way of apology. And maybe you've switched your heart and your gallbladder, I said, to myself luckily.

Not even my wardrobe has escaped the genes for change coursing through her veins, or wherever it is genes course. For evidence, I offer my robe, the one I toss on before daybreak to power walk Brutus, our 105-year-old dog, humanly speaking.

In a fit of compassion, dear wife decided that the robe was too thin for the morning air whistling across our Freedom, Ind., hilltop. It would be just the thing to cut up, however, and use for cleaning the oven, should she ever get around to it. In its place she proudly presented me with a robe she had made from what must have been an old army blanket.

This dear woman had even gone to the zoo and somehow got permission to use a gorilla for a model. The sleeves hang down to my knees, and I can reach the pockets only from a squat position. The squatting down I can handle; it's the squatting up that gives me problems, as the robe weighs at least 45 pounds. I won't try to estimate its girth, but I can't wrap the thing around me without getting a running start.



Or take my side of the bed, which should be private property, right? Especially when everything is in order, magazines stacked neatly on the left side of the nightstand, fiction on the right, Tums and Ben-Gay in the center, non-fiction piled orderly on the floor. Certainly no grounds for the ultimatum: "Get rid of that mess or get out of the way!"

Sure enough, the next time I was out of the way, I came home to find that she had assembled a bookcase from Wal-Mart and arranged my stuff so that I'm still looking for the book I was reading when she turns out the light.

This brings up another little matter, if you have a minute.

In slapping the bookcase together, she got the unfinished ends of the side panels up and the finished ends on the floor. To turn the finished ends up would require unloading the thing, but then the shelves would have the unfinished sides up. So there it is to this day.

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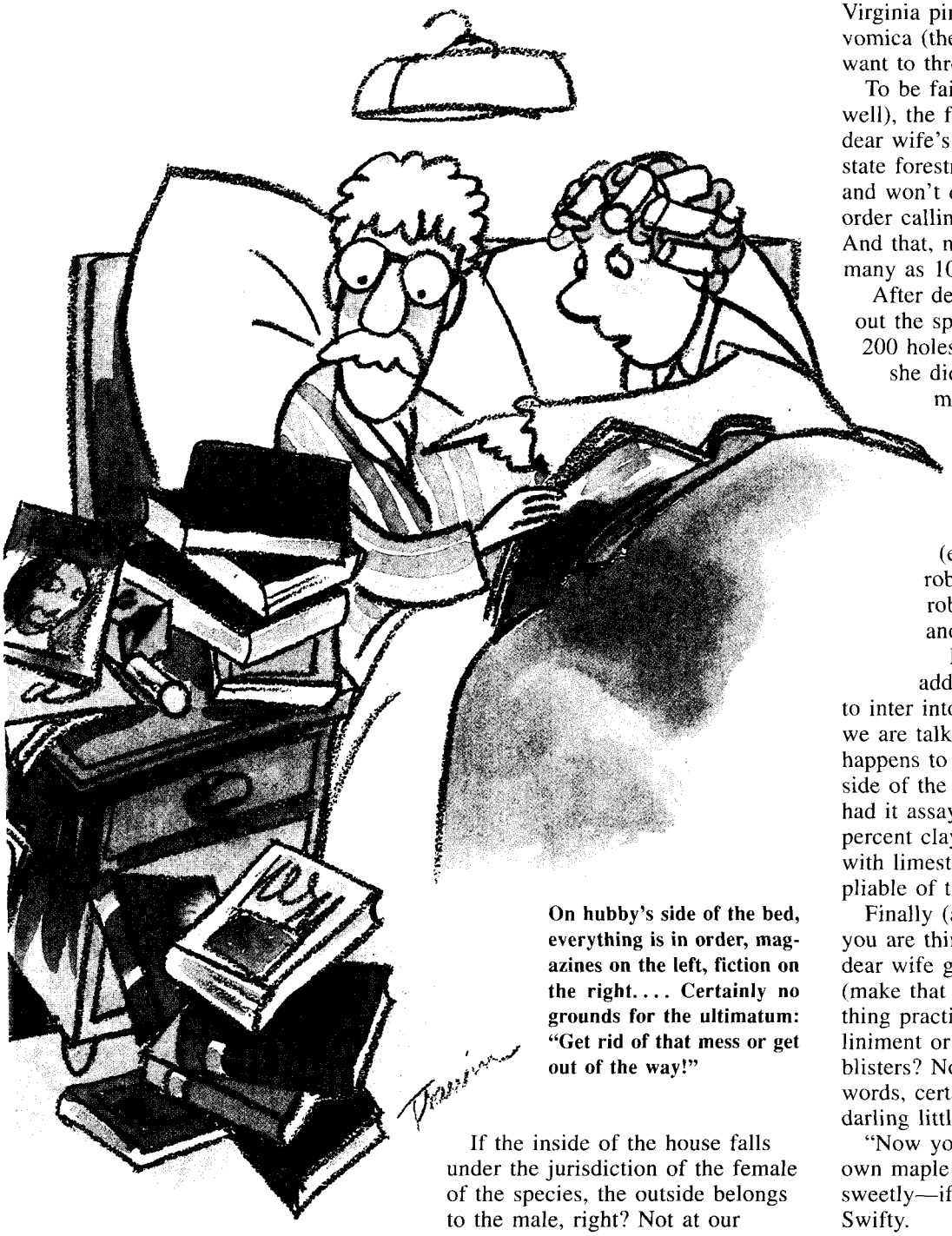

On hubby's side of the bed, everything is in order, magazines on the left, fiction on the right.... Certainly no grounds for the ultimatum: "Get rid of that mess or get out of the way!"

The only thing in its favor, it coincides with the stereo cabinet dear wife assembled in our living room. Here, if you'll notice, as most visitors do, the finished back panel faces the wall and the raw side is plainly visible through the front glass doors. Make a point of it? I'd sooner run into the proverbial buzz saw.

If the inside of the house falls under the jurisdiction of the female of the species, the outside belongs to the male, right? Not at our theater of operations. Not when God has failed to provide trees in the correct number and in the right places.

The main attraction that lured us to these 13 hilltop achers (and I do mean achers) was the view. Our view today, however, has changed from White River, the lush valley and the little town of Freedom, to Virginia pine, blue spruce, and nux vomica (the tree that makes you want to throw up).

To be fair (I must not be feeling well), the fault is not entirely my dear wife's. Part of it goes to the state forestry people who sell trees and won't dirty their hands on an order calling for fewer than 200. And that, my friend, is twice as many as 100.

After dear wife had pointed out the spots and I had dug the 200 holes and lugged the water, she did her part by handing me the 200 trees to commit to the earth. Three days later, noticing that I had regained my faculty for walking upright (except while wearing the robe—remember the robe?), she ordered another 200.

If you are counting, this adds up to 400 trees for me to inter into the terra firma. And we are talking here of terra that happens to be as firma as the north side of the Alps. While I haven't had it assayed, I peg it at 80 percent clay, 20 percent limestone, with limestone being the most pliable of the two.

Finally (and about time, I'm sure you are thinking), guess what my dear wife gave me for my last (make that latest) birthday? Something practical, like a jug of liniment or a hose for draining my blisters? Nope. It was, in her words, certainly not mine, "a darling little sugar maple."

"Now you can make your very own maple syrup," she said sweetly—if you'll forgive a Tom Swifty.

To tell the truth (I *must* be sick), I don't expect to be around by the time this darling little hunk of flora begins to produce sap. And if you are concluding that it has produced one sap already, go ahead and conclude. At least I had the smarts to marry a woman who continues to supply me with material for these authoritative articles.

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THE RUSH IS ON

Millions of Americans hear Rush Limbaugh say what they would like to shout to liberal Washington politicians, if only they had the chance.

by John McCollister

Half his listeners swear by him; half swear at him. But that's nothing new for Rush Limbaugh, America's most listened-to (and talked about) radio talk show host.

Relatively unknown fewer than five years ago, Limbaugh has amassed an audience of some 15 million nationwide for his radio call-in show. So avid are Limbaugh's fans that restaurants throughout the country now advertise "Rush Rooms," where diners can enjoy their meal while listening to the "Rush Limbaugh Show." Others tape the show and gather later with friends to relish it in a relaxed atmosphere.

Loyal listeners insist Limbaugh is the only national media personality who says what most of middle America is thinking.

Indeed, Limbaugh leaves no room for guessing as to his politics. He boldly bashes any and all liberal and socialist views. He recently told a caller: "Nothing in my heart is liberal."

Many of his famous Limbaughisms reflect not only his conservative outlook but also his penchant for poking fun at those who take themselves too seriously.

On feminists: "Feminism was established so that unattractive women could have access to the mainstream of society."

On the peace movement: "If they want to protest something, let them protest the wheel. It kills more people each year than nuclear bombs do."

He attacks his favorite targets—including Ted Kennedy, Anita Hill, and Molly Yard—"with half my brain tied behind my back, just to be fair."

Limbaugh was not always so outspoken. At first he seemed destined to follow a typical radio career, bouncing from market to market as a disc jockey and occasional talk show host. He uttered his first media words in 1967 at age 16 on station KGMO in his hometown of Cape Girardeau, Mo.—a city of 34,000 on the Mississippi. Four years later, he went to station WIXZ in McKeesport, Penn., a suburb of Pittsburgh. For 10 years Limbaugh worked at molding his craft, attempting a variety of approaches to entertain his audience.

In 1983 he finally found his niche as a political commentator at KMBZ in Kansas City. One year later "The Rush Limbaugh Show" moved to KFBK in Sacramento, where Limbaugh succeeded another outspoken advocate of the political right—Morton Downey Jr. On Aug. 1, 1988, his national show premiered on 54 affiliates.

Today, Limbaugh's live, call-in program originates from WABC in New York, airing on more than 580 stations each afternoon from noon until 3 p.m. Eastern time.

His syndicated nightly television program airs in every major market (except Washington, D.C.), and his book: *The Way Things Ought to Be*

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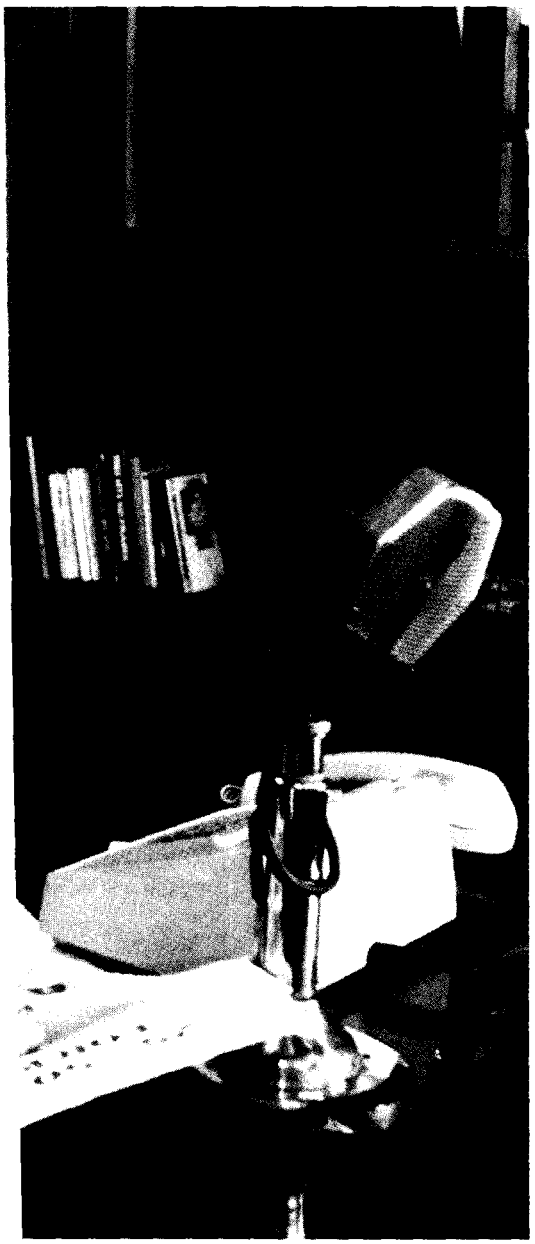
(Simon & Schuster) was number one for months on *The New York Times* best-seller list.

Media analysts attempt to explain Limbaugh's meteoric rise in popularity. A few still claim he's little more than a fad; many see him as an established leader of mainstream America.

He's Controversial.

Limbaugh's fans praise his on-target, ultraconservative blasts while critics label him an Archie Bunker of the '90s. "Rush tells it like he sees it," says Limbaugh's chief of staff, Kit Carson. The so-called "gay rights movement" is one target. Limbaugh says he has no ax to grind against gays, but he says, "There's a reason why certain views are minority-held views. Why should the gay community have special rights or be given preferential treatment just because it's a minority?"



Affirmative action and help for the homeless are two projects most liberal commentators endorse. Limbaugh challenges their thinking. "It may not be a level playing field for everyone," he says, "but how you go about making that field level concerns me. Take affirmative action. I don't think you solve discrimination by transferring it to another race. Yet that's what affirmative action has done."

What about the homeless? "The homeless are not homeless because of anything political. Many of them are mentally disturbed. I've lost my job five or six times in my life and I haven't become homeless. Homelessness doesn't need to be applauded, celebrated, or romanticized."

Limbaugh's self-proclaimed role as guardian of America's thinking adds to his controversial image. "You don't have to read the newspapers," he jokingly said on a recent broadcast. "I read them for you and tell you what to believe."

Such statements, coupled with daily reference to the "E.I.B."—his "Excellence in Broadcasting Network" (referring to those stations that carry his program)—invites charges of arrogance by critics.

During his "Rush to Excellence" tours to various parts of the country each year, Limbaugh often agrees to air a special broadcast hosted by a local talk-show personality. "Many stations have hosts, who, on the air, regularly take potshots at me, which I find a bit puzzling," Limbaugh says. "I am on the station to help, not participate in contrived and phony rivalries under the guise of cross promotion. If local hosts spend a lot of time bashing me, the audience may wonder why the station airs my show. It's not particularly good business. But I guess that's the price you pay if you speak your mind honestly."

At times Limbaugh draws mixed reactions—from the same person. "It's the oddest thing," *Detroit Free Press* columnist Bob Talbert writes. "I hate many of Rush Limbaugh's antiquated and archaic attitudes, yet I love his show."

Outsiders may be divided about Limbaugh, but professional broadcasters appreciate what he's done for the medium. Chuck Dickemann, program manager for KDKA, Pittsburgh, says, "Rush does his job—and very well, from what the ratings indicate." Dave Laing, talk show host for WNDB in Daytona Beach, notes that Limbaugh's program has increased the number of listeners of his and other talk shows. "We were the first station in central Florida to air Rush," Laing says, "and he has more than doubled our audience from noon until three. In addition, national advertisers are buying time on our local station during his broadcast."

On the peace movement: "If they want to protest something, let them protest the wheel. It kills more people each year than nuclear bombs do."

He's Clever.

Limbaugh describes himself as an entertainer *first* and a conservative *second*. "First and foremost I want to be an entertainer," he insists. "People listen to radio for three reasons: 1) to be entertained, 2) to be entertained, 3) to be entertained. How do I do this? I illustrate absurdity by being absurd."

"Some people love to hate him, but they keep coming back," says Eric Seidel, general manager of WGST in Atlanta.

"People often hate me at first because of what they perceive as a pompous arrogance," Limbaugh admits with a laugh. "But pretty soon they figure out it's a put-on."

To the outsider, Rush Limbaugh might sound like one who reacts before thinking. Steady listeners know that nothing could be farther from the truth. This master of put-on understands precisely what he's doing. "The reason I do what I do, the way I do it, is to get the largest radio audience possible and to get the largest dollar amount I can for commercials," he recently told an audience in Daytona Beach, Fla. "It's a business—strictly a business."

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LOVE AFFAIRS BLOOM AMID BITS AND BYTES OF HOME COMPUTERS

The marriage between seniors and computers is perfectly natural, providing a forum to swap gardening tips, debate issues, and form new friendships.

by Clare Ansberry

JoAnn Oakes and Mayer Solen fell for each other just before Christmas in 1991. She had been watching from a distance, as Mr. Solen flitted from one group of friends to another, greeting all the women as "Honey," and they matching him with "Dear."

Finally, the two began a conversation. They discovered they were both widowed—she after a 35-year marriage and he after 49½ years. Both loved Mexican food and ballroom dancing.

They talked on and on, never noticing that everyone else had left the party. At midnight, they said good night, turned off their computers and went to bed, Mr. Solen in Carson City, Nev., and Mrs. Oakes in Bainbridge, Wash.

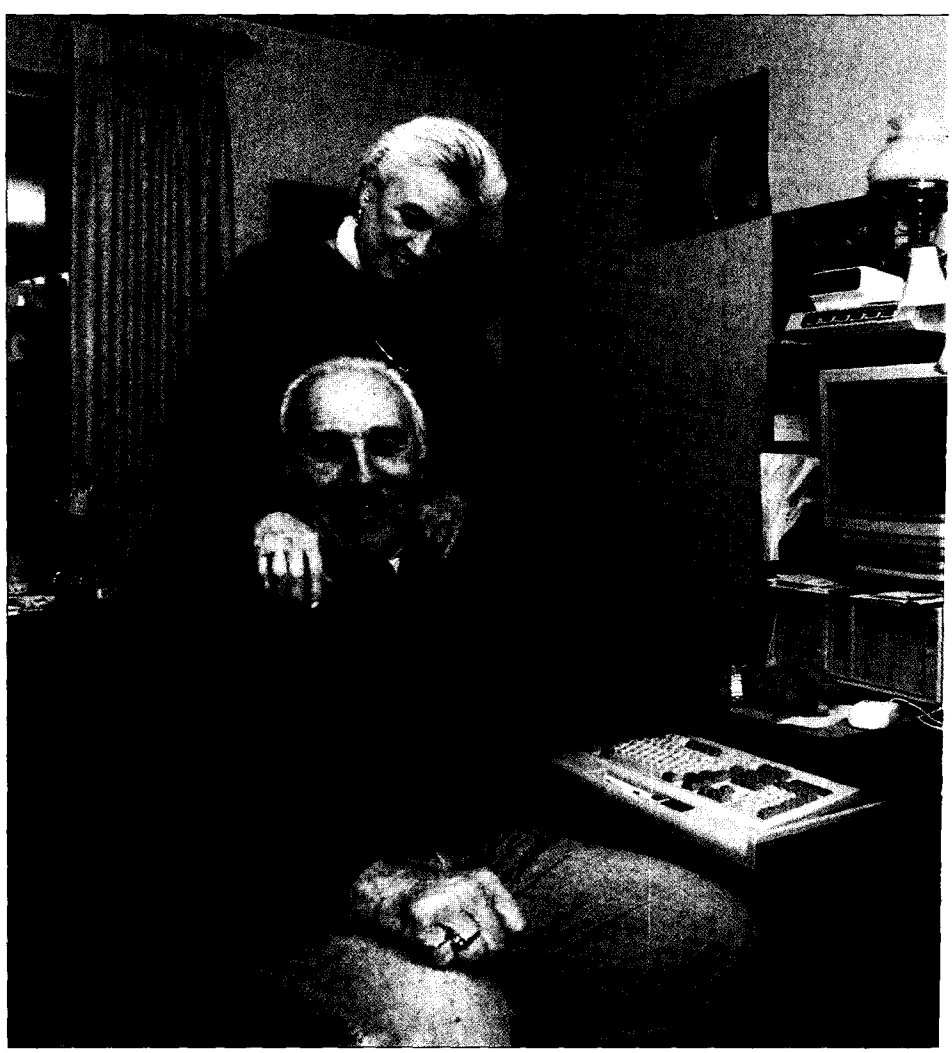
He Said, She Said

From then on, they talked nearly every day over the computer. Last March, Mr. Solen visited Mrs. Oakes in Washington. In June, the 64-year-old Mrs. Oakes drove to Nevada to see Mr. Solen, 76.

"I came down here with the idea of just a visit. I haven't been back" to Washington since, she says. For Mr. Solen, it was love at first byte. "Before I ever met her, I had fallen in love," he says.

Computers are playing Cupid for what seems to be an unlikely target—a generation that didn't know the difference between a mouse and a modem until they reached 60. Now, older adults are plugged in to interactive networks like San Francisco-based SeniorNet, where they can exchange gardening tips, debate atheism, or try to come up with all the lines of "I'm Forever Blowing Bubbles."

The marriage between seniors and computers is, in fact, perfectly natural. They grew up writing weekly letters and keeping journals and diaries: A computer is an easier, eraserless way to do the same. And more. Without ever leaving Ohio, they can carry on one conversation with someone in Maine and New Zealand, and later meet the professed cousin of Harry Truman and a man who says he once kissed Elizabeth Taylor. Some, like Mr. Solen, log on at 6 p.m. to SeniorNet's Wednesday night "cocktail party" and stay until midnight.



Still happily together, Mayer Solen and JoAnn Oakes credit SeniorNet for "introducing" them not only to each other but also to the world of other seniors. "SeniorNet offers a forum where seniors can talk freely, help each other, and even console each other," JoAnn says. "Even though we are scattered across the country, we can share thoughts, opinions, and concerns about issues that affect us. It's like a big senior family. When Mayer and I travel around the country, we make it a point to look up other SeniorNet members."

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SeniorNet has 6,000 members and 53 learning centers across the country. Mary Furlong, founder of the seven-year-old network, says it is a painless way to socialize, especially for those recently widowed and reluctant to go out alone and for the disabled.

Since a 1982 auto accident, Theodora Froothof of Colorado Springs has been confined to a wheelchair. She doesn't get out much to meet people but struck up a friendship over the computer with Edward Junkin, a retired doctor from Calgary. He has spent the last three Christmases at her house.

With no risk of censure or rejection, grandparents can let their hair down. Church-going Baptists confess they are really agnostics. Once straitlaced, they are flirting shamelessly with someone 500 miles away named Texas Tom. If they don't like the company or the discussion, they don't have to be polite. "Just hit the control button and you're gone," says JoAnn Oakes.

Women find computers especially liberating. Jessie Askew, a 55-year-old active volunteer, relied on her husband to keep all of her volunteer groups' records on computer. When he died in 1985, she bought her own. "I had to teach myself how to use it, but it made me so confident," she says.

On the first New Year's Eve after her husband's death, she decided to go online and found herself in her Lynchburg, Va., home playing Battleship with a 14-year-old from Baton Rouge, La. "I thought this is so neat. Here I am playing games with a kid halfway across the country," she says. "It caught my imagination."

Mary Furlong, founder of the seven-year-old network, says it is a painless way to socialize, especially for those recently widowed and reluctant to go out alone and for the disabled.

Totally Hooked

Having moved in with her parents in Texas to care for her ailing mother, Mrs. Askew became a computer groupie and joined several networks. During a Wednesday night cocktail party last year, she noticed a newcomer, Chuck Ramsey. She called up his biography, which along with hobbies described his computer. "Chuck," she typed, "I just read your bio and I think I'm in love with your computer."

A few seconds later, Mr. Ramsey wrote: "H—, I just read your bio, and I think I'm in love with you. Will you marry me?" Jessie turned to her 74-year-old father and asked, "What should I say?" "Tell him 'YES,'" she says her father ordered. She did, and the party broke into peals of "HAH, HAH" over what seemed to be a joke.

A few nights later, Mr. Ramsey asked her to call him on an 800 number so he could hear her voice. She discovered that her new interest, who was curt on the computer, could only type with two fingers and was much more expansive on the phone.

Within a few months, Mr. Ramsey was waiting for her on her father's front porch. "By the time we got to the house, it was arm in arm," says 68-year-old Mr. Ramsey, who lives in Woodland Hills, Calif. He has made five trips since, and they are talking about taking a trip to Denmark in the spring.

"This is kind of a wild adventure for me," Mrs. Askew says. Earlier, when an infatuation with a computer acquaintance in North Dakota turned out to be only that, she introduced him to one of her friends in Florida. They corresponded by computer for months and finally met. Three days later they married.

Convincing Looks

Computers, it turns out, are much more revealing than they might seem. JoAnn Oakes says: "If you talk to someone long enough, you find out how deep they are or whether they're self-centered." When she first encountered Mr. Solen, she thought he was a Lothario, with all his flirting. But then she saw his response to a reticent newcomer, who after minutes of silence, typed, "I just lost my wife of 40 years." The screens went silent until Mr. Solen logged on, talking about his own grief after his wife died.

That impressed her. Still, she had some reservations. What if he was sloppy or unshaven? She knew only from his description that he was fit, used to be 5-feet-11 but was now 5-feet-8½ and had silver hair. "I didn't fall in love until after I saw him," she says.

That convinced her. But convincing

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For More Information

SeniorNet is a non-profit international community of computer-using people age 55 and over. Membership is for anyone who has an interest in computers and a desire to learn more. Membership fee is $25 per year. For an additional $9.95 per month, you can participate in the SeniorNet Online network. To learn more about SeniorNet, call 1-800-451-2266.

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The American Illustrators Hall of Fame

AMERICA OUT OF DOORS

Celebrating the art of Saturday Evening Post *illustrator and Western painter John Clymer.*

by Steven C. Pettinga

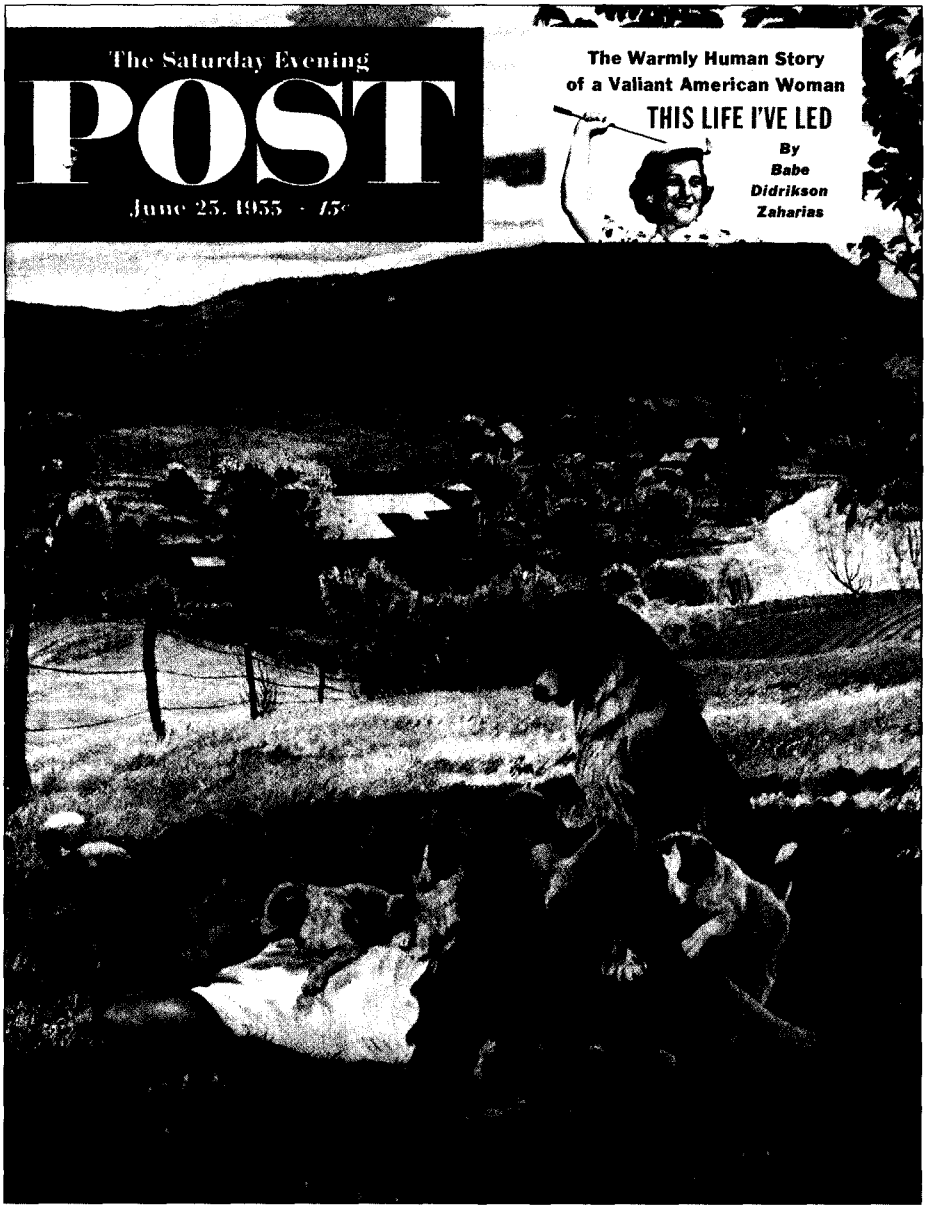
The high desert country of Washington state is bordered on the east by the soaring peaks of the Cascade Range. Artist and illustrator John Clymer grew up in this rugged area of humbling landscapes and inspiring views that later became the source for some of his most memorable *Saturday Evening Post* cover paintings.

Clymer remembered his first encounter with art. A magazine salesman called on the Clymers' home in Ellensburg, and young John, scrutinizing his samples, was entranced by the beautiful illustrations. This was the early '20s—the golden age of magazine art—when magazines and advertisers used paintings rather than photographs to attract readers and customers.

Thereafter, Clymer haunted newsstands, scouring new periodicals for interesting illustrations. At 13, he convinced his parents to pay for a four-year art correspondence course after promising them he'd complete high school, despite being a mediocre student. The idea of becoming an illustrator had a dual appeal. "I always wanted to live in the mountains," he later recalled. "I wanted to get into forestry, but my folks wouldn't listen to that at all. Then I got to thinking that if I could paint pictures, I could live wherever I wished."

At 16, Clymer sent several wildlife drawings to the Colt Firearms Co. To his delight, the art director bought one. His first sale appeared in several national magazines.

Clymer eventually attended four art schools: the Vancouver School of Fine



Perhaps while still suffering the pangs of cabin fever, Clymer came down with a case of spring fever. To combat the affliction, he had his kids skip rope in the living room, then painted a springscape around them. As the cover artist said, "It's a good thing to have four seasons a year—all of them spring."

Feet that have hibernated through the winter in shoes have now come alive to feel the green grass of summer. The boy, hoping to acquire a cheek of tan, however, is instead acquiring a cheek of slobber from a litter of affectionate puppies. The boy should be helping his dad with the horses, of course, and the puppies should be learning the ropes of guard-dog protection. But as artist Clymer reminds us, boyhood, puppyhood, and summer are a combination that overcomes all other obligations.

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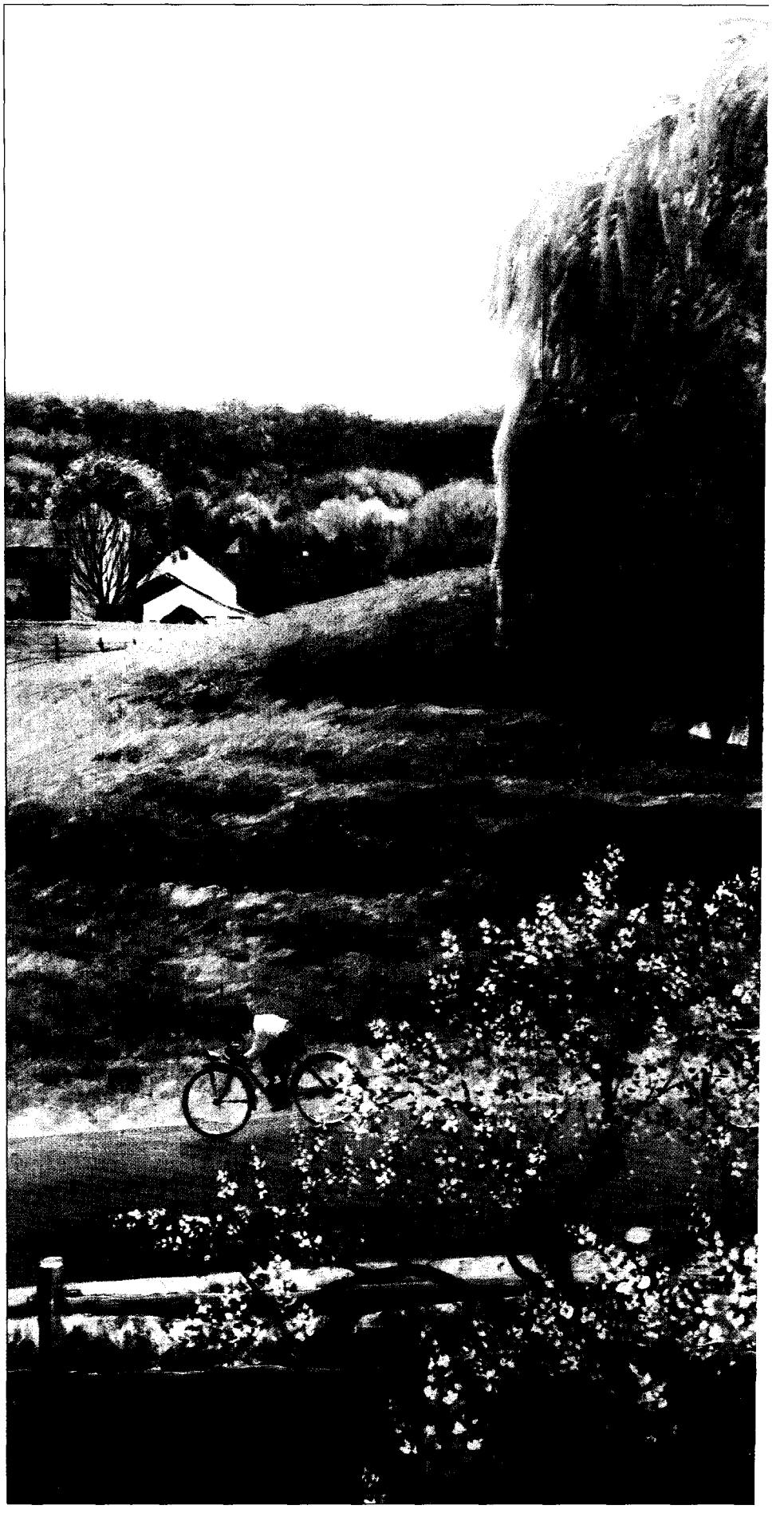
Art, the Ontario College of Art, the influential Wilmington Society of Fine Arts in Delaware, and Harvey Dunn's Grand Central School of Art. Along the way, he made some influential acquaintances. In Vancouver, he befriended George Southwell, an elderly English artist who helped him master the basic elements of form and composition. In Wilmington, he met the early *Post* cover illustrator N. C. Wyeth, who shared Clymer's enthusiasm for Western and animal themes. Another *Post* illustrator, Harold Von Schmidt, later helped the artist break into new illustration markets.

Clymer's commercial career began in Canada. He worked there for 11 years, earning a solid reputation and membership in the Royal Canadian Academy, but his burning ambition was to make a name in the United States. A summer sojourn in Canada, however, became a transforming experience for the young artist. After working to the point of physical exhaustion, Clymer took some time off—on doctor's orders. He spent a summer as a deckhand on a Yukon paddlewheeler that delivered supplies to Indians and back-country settlements. The people and places stayed with him. "I never planned it that way, but that chance summer trip has guided and shaped my life ever since," he said.

Clymer married childhood sweetheart Doris Schnebly in 1932. In 1936, the growing family moved to Westport, Conn., where his U.S. career slowly gained momentum. Clymer's scenic and wildlife paintings found buyers at a local gallery, and, in 1942, he landed two *Saturday Evening Post* cover assignments. The first, depicting a native American totem pole with warplanes flying overhead, may have been inspired by his Yukon trip of years before.

During World War II, Clymer, at age 36, joined the U.S. Marine Corps. There he illustrated the *Marine Corps Gazette* and *Leatherneck* magazines and, with his friend Tom Lovell, did a series of paintings depicting Marine Corps his-



A family that rides bicycles together, stays fit and healthy together. Artist John Clymer further suggests that one reason for the spring season is for riders to escape the confinement of their stationary bikes and to enjoy the freedom of the open road and the great outdoors.

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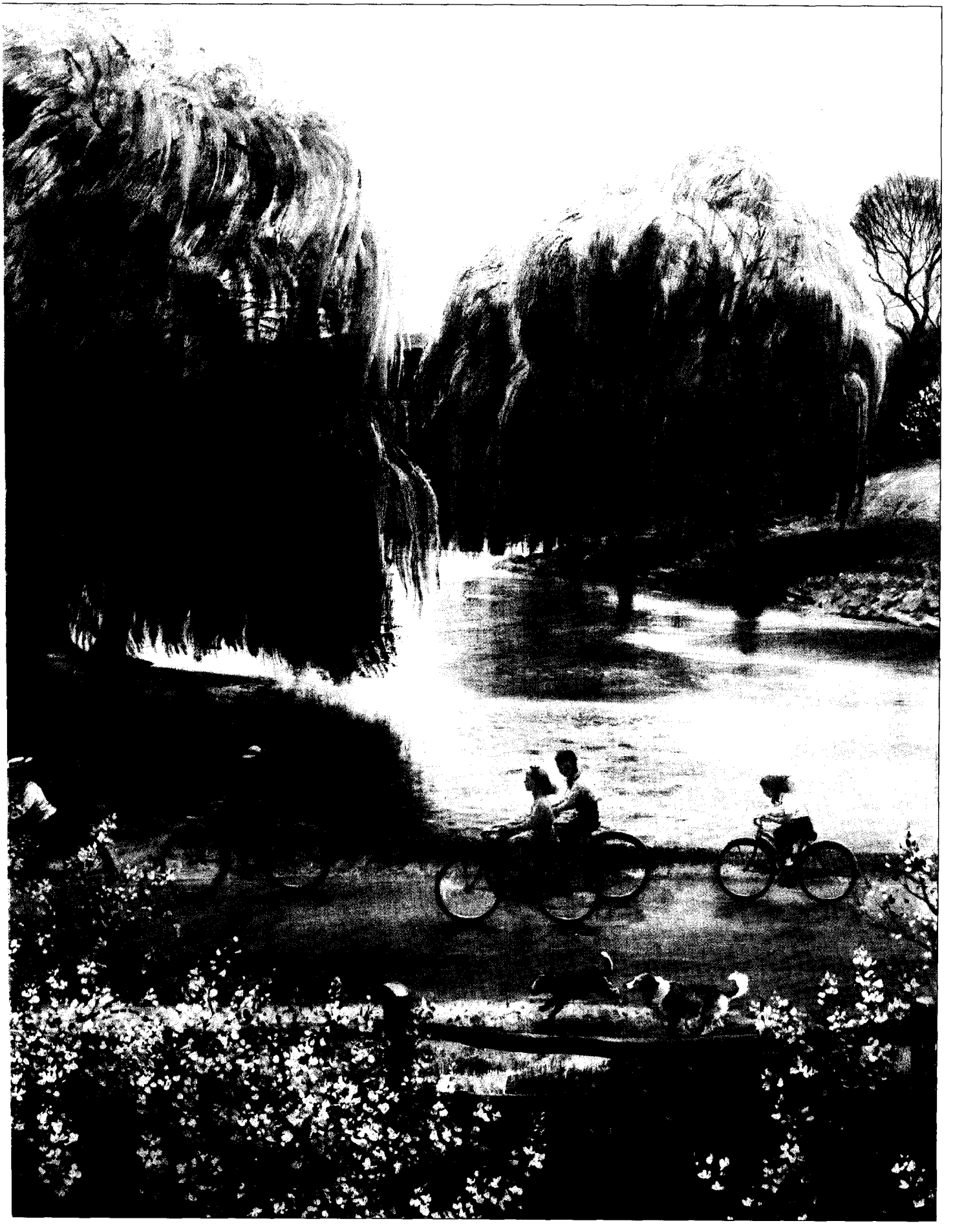

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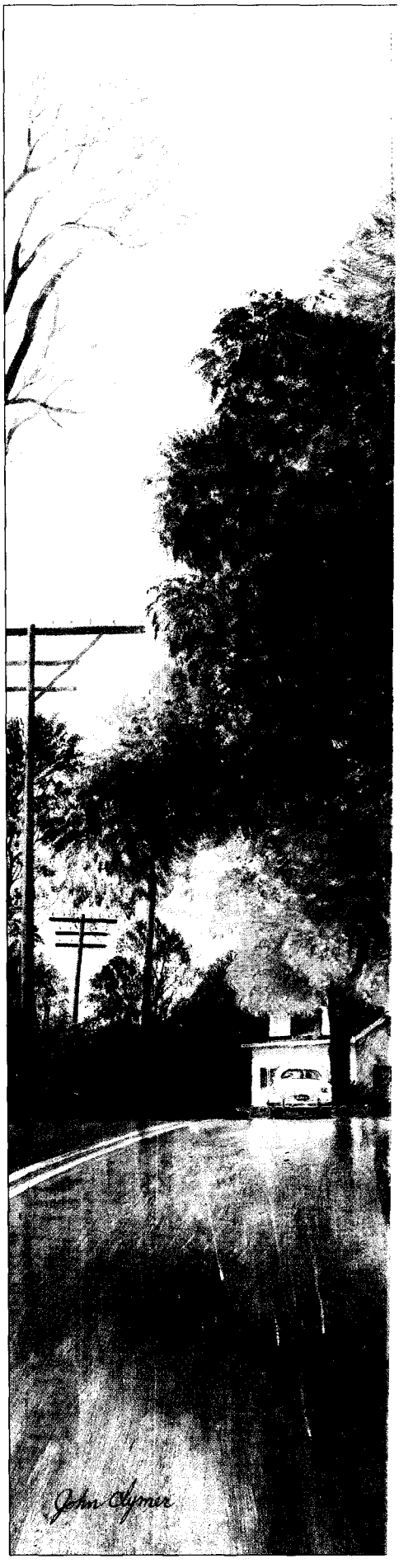
tory that still hang at the national Marine headquarters in Washington, D.C.

Following the war, during a family visit to Ellensburg, Clymer chanced to see his son peering into a hole in an old poplar stump. It struck him that this would be an ideal *Post* cover. He submitted the idea, and it was accepted. Thus began a 12-year association with the *Post*, resulting in about 80 cover paintings.

The artist traveled the country in search of cover subjects and settings. One summer he drove 13,000 miles. As the national highway system expanded, more and more families took driving vacations. Clymer's covers were popular. When the *Post* offered reprints, the response was overwhelming.

During his last 20 years, Clymer concentrated on paintings of Western and historical subjects. In 1968, he and Doris moved to Teton Village, Wyo., back to the mountains he loved, where he established a reputation as one of America's foremost Western artists with a flair for historical accuracy. "Only a small part of the epic story of the Western frontier has been recorded, and it's been my ambition to make a truthful contribution to that record in my paintings," the artist said.

John Clymer died Nov. 2, 1989. In 1991, a museum of his works was opened in his hometown. The *Post* Illustrators Hall of Fame displays many of Clymer's paintings. Western art collectors seek out Clymer's works, which have sold for as much as $300,000—quite a legacy for a boy who only wanted to be outdoors. ✖



"If there is a puddle to be found, kids will find it and walk in it," John Clymer said of his Oct. 20, 1902, cover painting. He found these kids walking home in Rockport, Mass. The artist made a color snapshot, then painted the cover on returning to his home in Bridgeport, Conn.

Whether this cover depicts a "fawn" memory from Clymer's boyhood or a real boy-deer situation the artist witnessed in the wilds of Wyoming, we don't know. We do know that Clymer, in addition to illustrating, was a successful wildlife painter. Here he merged the two.

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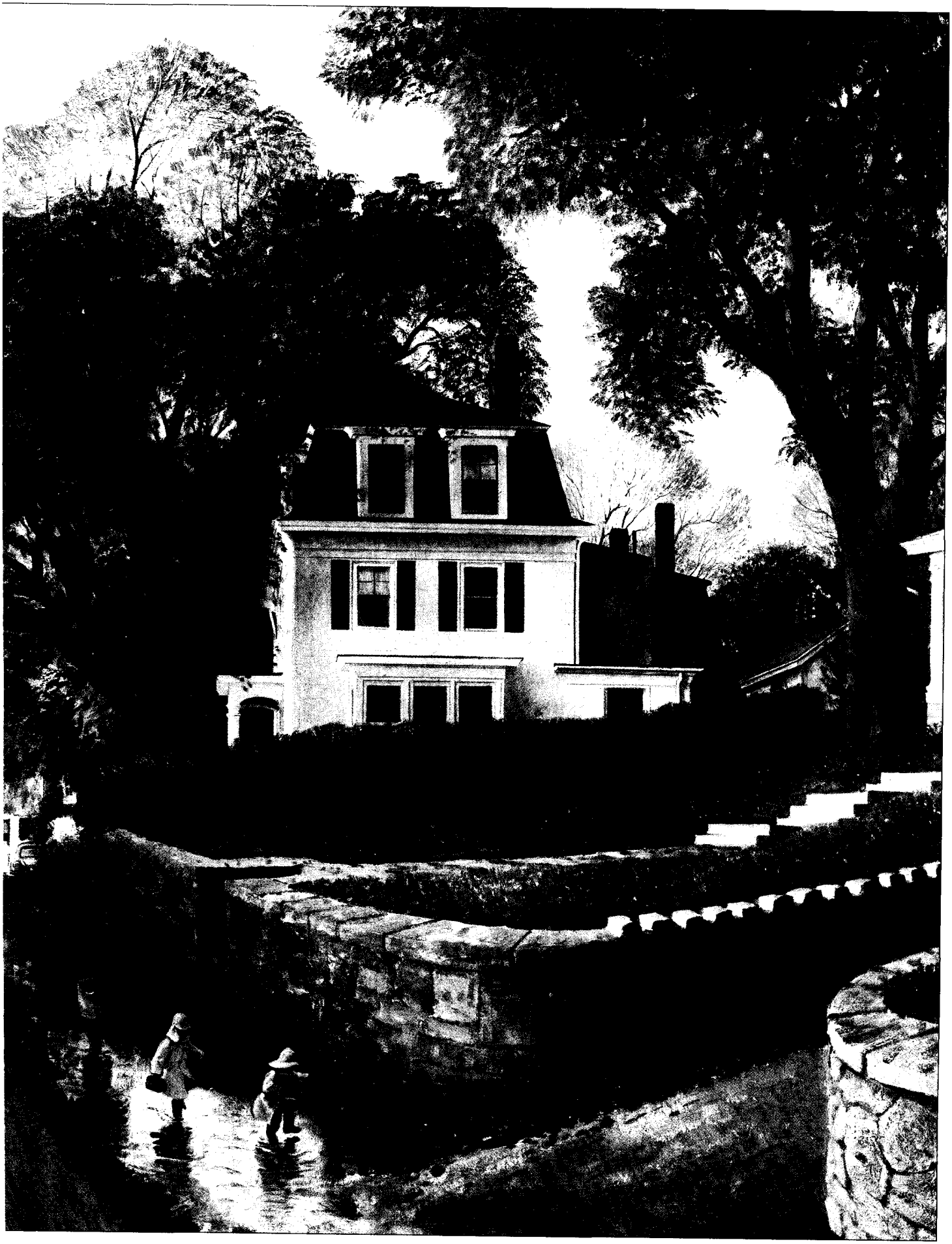

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SOUTHERN BAPTISTS: BEYOND THE STAINED-GLASS WINDOWS

America's largest and still growing Protestant body, the Southern Baptist Convention considers itself a 'denomination of destiny.'

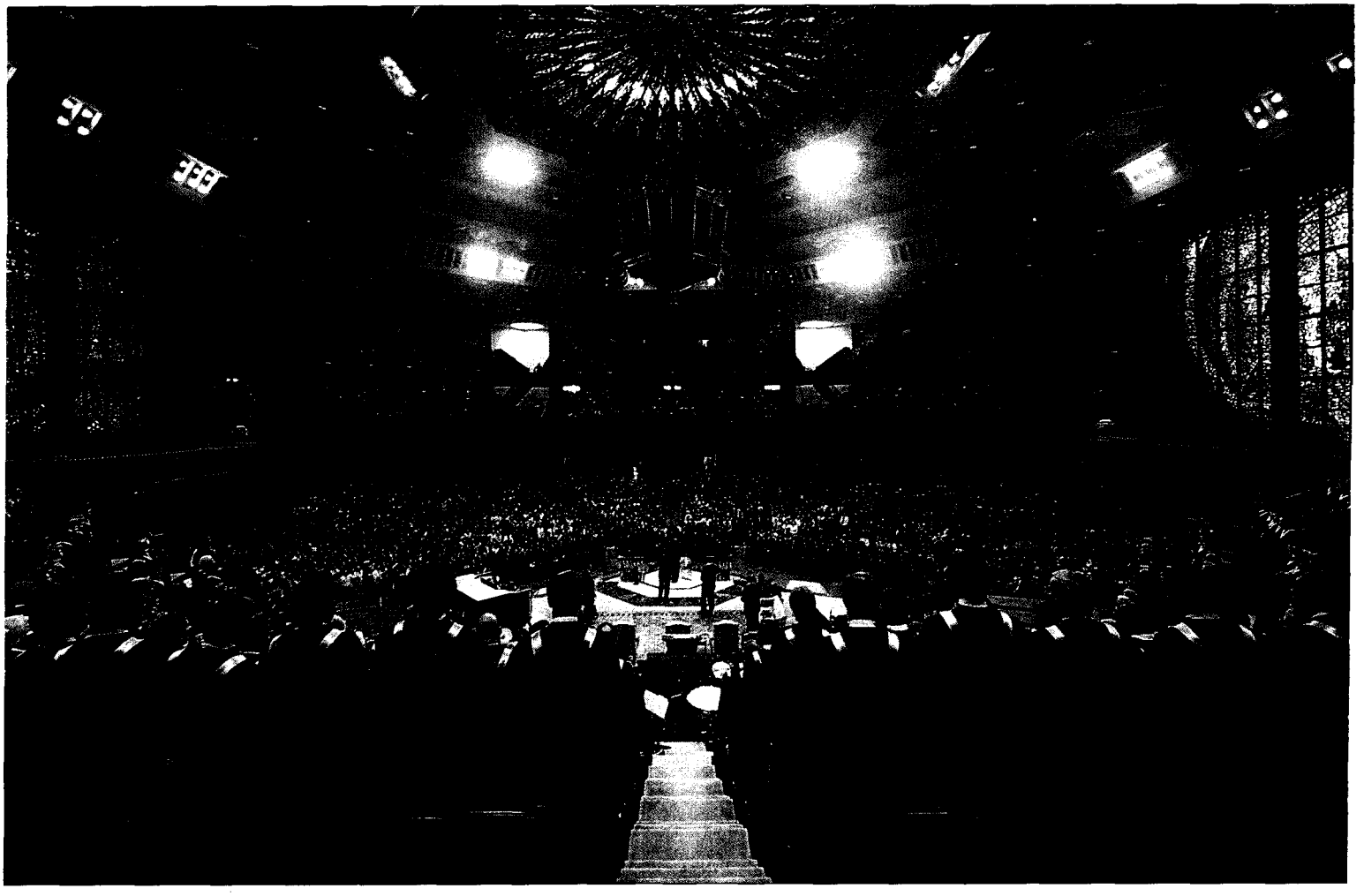
by James C. Hefley

As a dazed Dade County, Fla., family surveyed the rubble of their hurricane-shattered house last August, they were surprised to see a smiling man climb toward them over the debris. "Go tell your friends there's free food," the man called out. "It doesn't cost anything but a smile. And Jesus loves you."

The man, Dave Tracy, a Southern Baptist volunteer, had driven all night from South Carolina to lend a helping hand. He wasn't alone. About 3,000 volunteers arrived from Georgia and additional thousands from other states. The previous day, the Southern Baptist Convention had issued a call for assistance, and its members turned out in force. Some came in 18-wheeler mobile-rescue units, others in RVs equipped with propane gas, electric generators, and mammoth cooking pots.

The rapid mobilization of such a life-saving force is one advantage of being America's largest Protestant denomination. The Southern Baptists now number more than 15 million in the United States and, in spite of their name, they are no longer just a Southern denomination; they have spread to every state, as well as Puerto Rico and the Virgin Islands.

The largest of the 15 separate Baptist bodies in the United States, the Southern Baptists are a branch of the early Baptist movement in America.



Second Baptist Church of Houston, with an average weekly attendance of 13,000, boasts one of the SBC's largest congregations. Fifty-five "mega-churches" drawing 2,000 or more for Sunday services now dot the Southern Baptist landscape.

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The first Baptist church in the United States was founded in 1639 by Roger Williams, a Boston minister who was banished from the Massachusetts colony for his belief that civil power should not be used to control conscience. Williams invited fellow dissenters—including Jews, Quakers, atheists, and free-thinkers—to join him in the new colony of Rhode Island. Baptists have been sticklers for religious and personal liberty ever since.

Nearly 150 years later, another Baptist, John Leland of Virginia, was instrumental in the adoption of the Bill of Rights, which states, "Congress shall make no law respecting an establishment of religion or prohibiting the free exercise thereof. . . ."

The Southern Baptist Convention split from the American Baptist fold in 1845 over the northern abolitionists' rejection of a Georgia preacher who was a slaveholder. At that time, Southern Baptists numbered about 350,000. Today, 15,365,486 Southern Baptists worship in more than 38,000 U.S. congregations.

Despite its white, southern, and rural heritage, the Southern Baptist Convention is today the most ethnically diverse of all U.S. Protestant denominations, representing Hispanics, blacks, and 101 minority language groups. Its once segregated congregations are now widely integrated. In recent years, even the familiar clean-lined, white-columned Southern Baptist church buildings have conformed to progressive needs.

New mall-like complexes, dubbed "mega-churches" by the media, are springing up in urban areas. These churches offer amenities that go beyond the usual sermons and Sunday school. Second Baptist, Houston, for example, has a glass-walled aerobics center and a 6 a.m. workout class called "Higher Power."

Amenities such as gymnasiums and health centers are *de rigueur* in the growing ranks of Southern Baptist mega-churches that now number more than 50. Southern Baptists have heard and agree with aerobics guru Dr. Kenneth Cooper that people who are fit "are less depressed, less hypochondriacal, have an improved self-image, and have a much more positive attitude toward life." Dr. Cooper is an active member of Prestonwood Baptist Church, Dallas, where Sunday school attendance surpasses 5,000.

In a three-day project, Lumbee Indians from North Carolina helped build a 3,000-square-foot church for the Sioux in South Dakota. More than 300 predominantly Native American SBC churches underscore the ethnic diversity of the denomination.

Christians in Kenya experience baptism by immersion. Southern Baptists support 3,897 foreign missionaries in 127 countries.

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One of the most innovative mega-churches, Second Baptist in Houston, terms itself, "The Fellowship of Excitement." The church is both market-sensitive and visitor-friendly. Its guiding light is Pastor H. Edwin Young, 54, who came to Second Baptist in 1978 when the congregation stood at 500 worshippers in a conventional building. Young challenged his congregation to build a state-of-the-art facility costing $34 million. Now members park their cars in lots with such biblical names as "Nazareth" and "Jericho," and worship in a 6,000-seat octagonal sanctuary larger than a basketball arena, surrounded by a quarter acre of stained glass and a choir "loft" that seats 400. Three nationally telecast Sunday worship services and three Sunday schools are held to accommodate the numbers. Weekly worship attendance now averages 13,000, including about 1,800 single adults. Young, who calls himself "an ole Bible man and a risk taker," says, "We had to break down the stained glass barriers so hurting people will come."

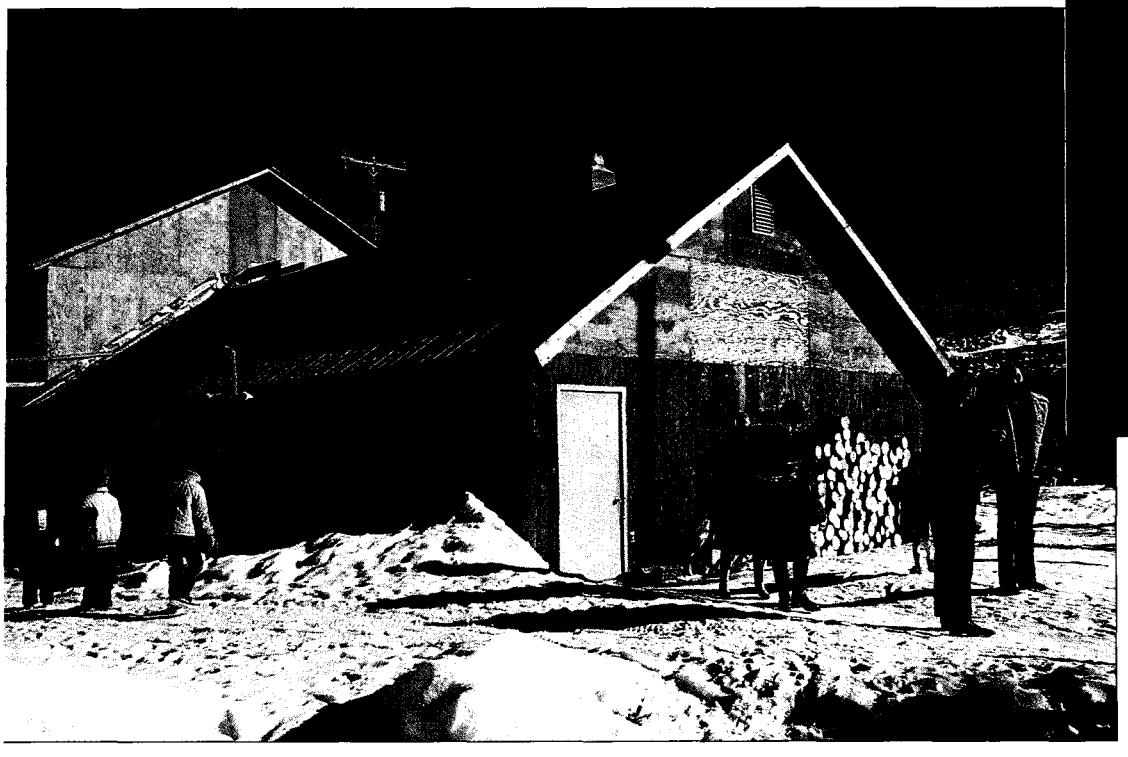
Houston's Fellowship of Excitement is a front runner in reaching a generation of urbanites who have no preference among denominations. Here acquaintances ripen into friendships and sometimes marriage. Bible study classes bear such titles as "Home Improvement" (for young married and engaged couples) and "Winner's Circle" (helping harried adults deal with pressure). Weekdays and evenings, members may attend study groups such as "Phobics Anonymous" or "Voter Education." In addition to the health facilities, there's a dinner theater, an employment bureau, a bookstore, and a restaurant where "saints" can enjoy low-cal food and "sinners" can add "all the fixings."

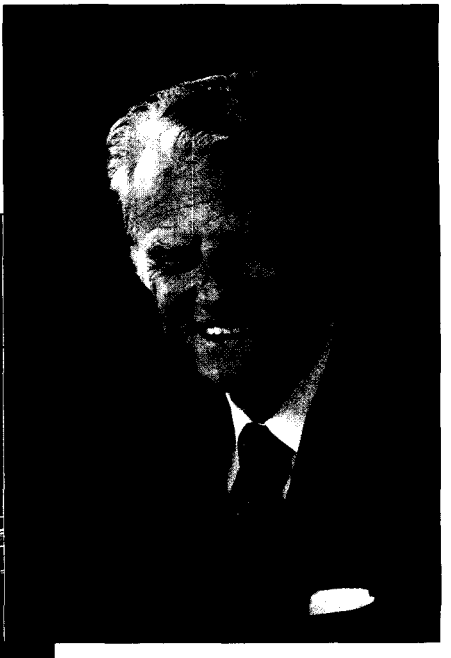
Renowned NFL coach Joe Gibbs, an active Southern Baptist church member, works with a variety of special ministries to youth in suburban Virginia.

Although size has advantages, the backbone of the Southern Baptist Convention remains the smaller and medium-size churches whose average resident membership is 286. They, too, have expanded their ministries. A growing number of churches, small and large, operate crisis pregnancy centers, such as The Women's Crisis Center at Central Baptist Church, Oak Ridge, Tenn., started by a pastor's wife whose daughter had been raped. In another project, women in the arts and crafts group of Hopewell Baptist Church, Tuscaloosa, Ala., devote one meeting a month to rolling bandages made from castaway sheets. The "holy rollers," as they call themselves, mail the bandages to a Baptist hospital in West Africa.

Under the Baptists' traditionally democratic structure, individual churches have wide-ranging freedom in planning their own programs, structuring budgets, naming their churches, and choosing pastors. Eighteen Southern Baptist churches have "called" women as pastors, even though most Southern Baptists do not consider the practice to be "biblical."

The convention is even democratic in its finances. Instead of financial quotas being levied on churches from above, each Southern Baptist congregation is allowed to vote on the





Southern Baptists claim world-renown evangelist Billy Graham as one of their own. Idaho's tiny Elk City Baptist Church (left) supports a vibrant Southern Baptist congregation, one of 44 in the state. Despite the rise of mega-churches, congregations averaging 250 remain the bulwark of the SBC membership.

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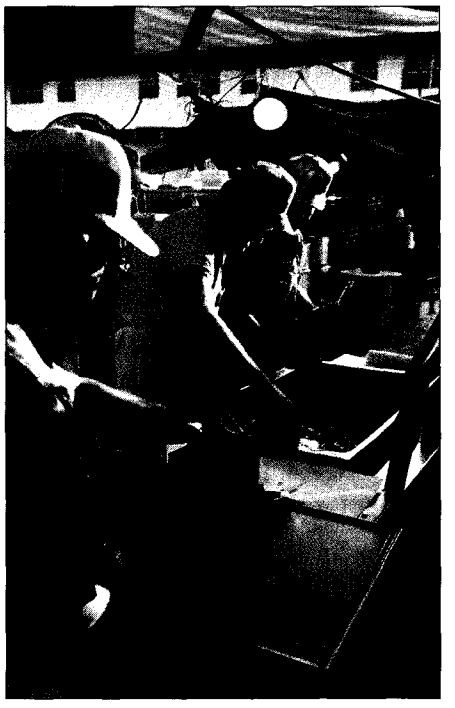
amount of its budget sent to the central "Cooperative Program" to support causes on state and national levels. Each church also designates "messengers" to attend the national convention that determines overall denominational policies.

In recent years, Baptists have been flexing their political muscles on subjects important to their denomination. In 1992, the national convention spoke out against abortion, homosexuality, euthanasia, and television immorality and applauded "Lord's Day" observance, religious liberty, and mission efforts in Eastern Europe.

Convention-passed resolutions are not binding on individual churches or their members; however, in 1992, the standards of individual churches so disturbed the convention that "messengers" voted to withdraw fellowship from two churches that affirmed the homosexual lifestyle. Those churches are no longer operating within the Southern Baptist fold. After a decade-long struggle within the Southern Baptist Convention between conservative and moderate forces, the conservatives are clearly in control. In 1987, the national convention affirmed by a majority that most Southern Baptists believe in the direct creation of mankind, the personal reality of Adam and Eve, the stated authorship of Bible books, and the accuracy of the Bible's miracle accounts and other historical passages. Most Baptists believe these views helped spur the denomination's growth. At least one study comparing Southern Baptist growth to that of other denominations showed that churches led by pastors who held that "miracles didn't happen as the Bible says they did," had fewer converts than churches whose pastors taught that the Bible is without error. Whatever the reasons for their growth, Baptists are pleased with membership statistics that show baptisms increasing for four of the last five years.

On the national level, Southern Baptists' views are advanced by the Christian Life Commission, which publishes brochures, friend-of-the-court briefs, newsletters, and videos. Meanwhile, at the grass roots, and usually out of the spotlight, 9,000 Southern Baptist missionaries carry on their traditional work in 127 countries and across the United States, and 100,000 Southern Baptist volunteers donate their time and skills without pay. Dentists Ryle Radke and Jack Evans traveled to Thailand to give free dental care to people who had never seen a dentist. A medical team led by John Anderson, a Dallas physician, carried inoculations for measles, mumps, diphtheria, and tuberculosis to 50,000 children in the republic of Kazakhstan of the former Soviet Union. In the slums of Lima, Peru, missionaries Beryl and Linda Boswell raised money for medicine and surgical tools so that nine-year-old David Valverde could have heart surgery. A Brazilian surgeon, in Lima for a conference, did the life-saving operation on the boy without charge. The boy's mother told a TV interviewer, "My son's recovery was a miracle."



Southern Baptist disaster relief teams from dozens of states converged on the Miami area in the wake of Hurricane Andrew. The morning after the devastating storm hit they were set up and serving hot meals.

Ed Young, elected Southern Baptist Convention president in 1992, says he can't see why Southern Baptists shouldn't be baptizing a million new converts a year by the end of this century. Morris Chapman, president of the Convention's Executive Committee, told fellow Southern Baptists, "We are a denomination of destiny. Southern Baptists are bursting into the future the way the sun bursts on the horizon in the morning."

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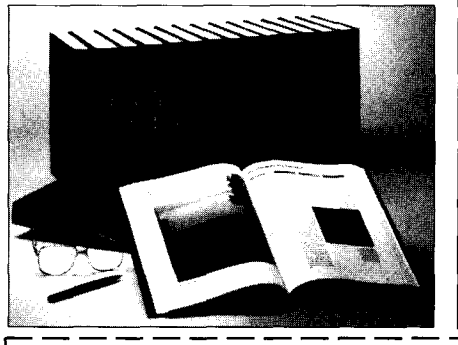

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TOMORROW

". . . only a life can pay for the life it takes;
the one death is only half complete."

by William Faulkner

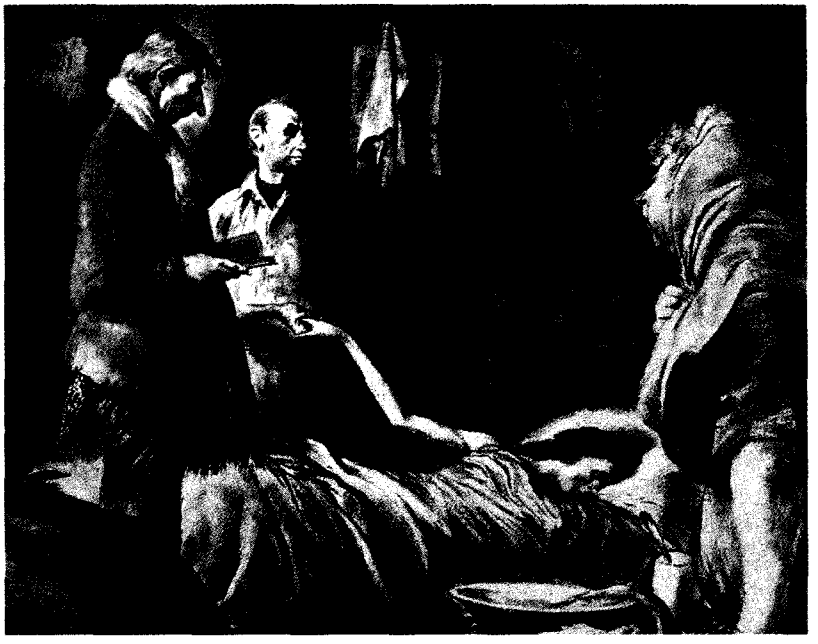
Illustration by Floyd Davis

Synopsis: *It should have been an open-and-shut case. The betting had been 20 to one that the jury would be out only 10 minutes before acquitting Mr. Bookwright of Frenchman's Bend of shooting Buck Thorpe, the good-for-nothing cattle thief who had run off with Bookwright's daughter. It had all happened 20 years before and Uncle Gavin was attorney for the defense. Uncle Gavin later said it was his only case that he ever lost where he was convinced that right and justice were on his side.*

The jury was hung by one man, Stonewall Jackson Fentry, a wizened little dirt farmer who refused to vote Bookwright free. Fentry couldn't have had anything against Bookwright; he testified under oath he had never seen Bookwright before. So Uncle Gavin had to know why Fentry had thrown the case. He took his nephew along and set out 30 miles into the hills to the Fentry cabin where Fentry's old father met them with a shotgun and ordered them off his land. Then Uncle Gavin went to the nearest neighbors, the Pruitts, an elderly couple who began telling him the story of Fentry, how all Fentry'd ever done was work on the tiny farm until one day, years ago, he'd left to take a job at Frenchman's Bend in a sawmill. At the mention of Frenchman's Bend, Uncle Gavin perked up.

"Whose sawmill?" Uncle Gavin said.

"Quick's," Pruitt said. "Old Man Ben Quick's. It was the second Christmas he never come home. Then, about the beginning of March, about when the river bottom at Frenchman's Bend would be starting to dry out to where you could skid logs through it and you would have thought would be settled down good to his third year of sawmilling, he come home to stay. He didn't walk this time. He come in a hired buggy. Because he had the goat and the baby."



"He rid seven miles to Preacher Whitfield's and brung Whitfield back about daylight, and Whitfield married them."

"Wait," Uncle Gavin said.

"We never knew how he got home," Mrs. Pruitt said. "Because he had been home over a week before we even found out he had the baby."

"Wait," Uncle Gavin said.

They waited, looking at him, Pruitt sitting on the gallery railing and Mrs. Pruitt's fingers still shelling the peas out of the long brittle hulls, looking at Uncle Gavin. His eyes were not exultant now any more than they had been baffled or even very speculative before; they had just got brighter, as if whatever it was behind them had flared up, steady and fiercer, yet still quiet, as if it were going faster than the telling was going.

"Yes," he said. "Tell me."

"And when I finally heard about it and went up there," Mrs. Pruitt said, "that baby wasn't two weeks old. And how he had kept it alive, and just on goat's milk——"

"I don't know if you know it," Pruitt said. "A goat ain't like a cow. You milk a goat every two hours or so. That means all night too."

"Yes," Mrs. Pruitt said. "He didn't even have diaper cloths. He had some split flour-sacks the midwife had showed him how to put on. So I made some cloths and I would go up there; he had kept the man on to help his pa in the field, and he was doing the cooking and washing and nursing that baby, milking the goat to feed it; and I would say, 'Let me take it. At least until he can be weaned. You come stay at my house, too, if you want,' and him just looking at me—little, thin, already wore-out something that never in his whole life had ever set down to a table and et all he could hold—saying, 'I thank you, ma'am. I can make out.' "

"Which was correct," Pruitt said. "I don't know how he was at sawmilling, and he never had no farm to find out what kind of a farmer he was. But he raised that boy."

"Yes," Mrs. Pruitt said. "And I kept on after him: 'We hadn't even heard you was married,' I said. 'Yessum,' he said. 'We was married last year. When the baby come, she died.' 'Who was she?' I said. 'Was she a Frenchman

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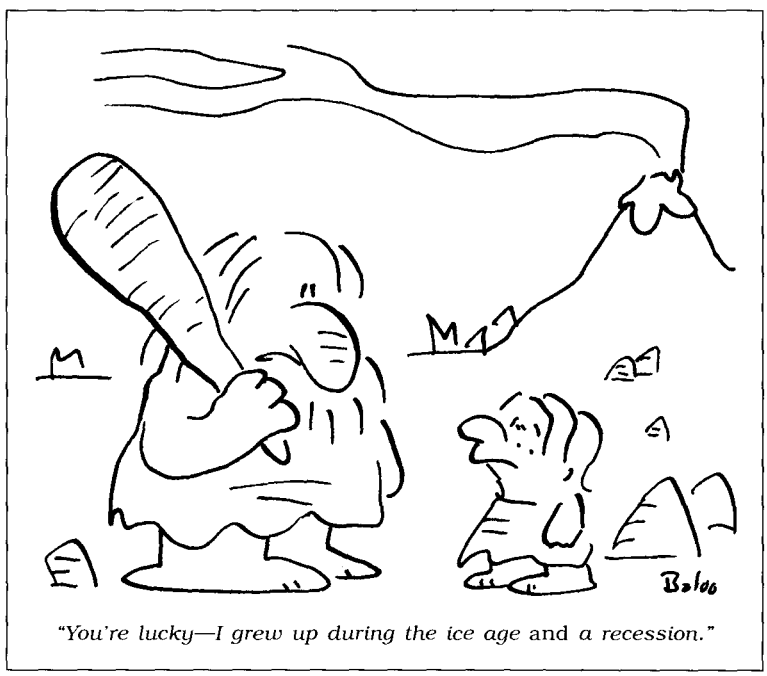
Bend girl?' 'No'am,' he said. 'She come from downstate.' 'What was her name?' I said. 'Miss Smith,' he said."

"He hadn't even had enough time off from hard work to learn how to lie either," Pruitt said. "But he raised that boy. After their crops were in in the fall, he let the man go, and next spring him and the old man done the work like they use' to. He had made a kind of satchel, like they say Indians does, to carry the boy in. I would go up there now and then while the ground was still cold and see Jackson and his pa plowing and chopping brush, and that satchel hanging on a fence post and that boy asleep bolt upright in it like it was a feather bed. He learned to walk that spring, and I would stand there at the fence and watch that durn little critter out there in the middle of the furrow, trying his best to keep up with Jackson, until Jackson would stop the plow at the turn row and go back and get him and set him straddle of his neck and take up the plow and go on. In the late summer he could walk pretty good. Jackson made him a little hoe out of a stick and a scrap of shingle, and you could see Jackson chopping in the middle-thigh cotton, but you couldn't see the boy at all; you could just see the cotton shaking where he was."

"Jackson made his clothes," Mrs. Pruitt said. "Stitched them himself, by hand. I made a few garments and took them up there. I never done it but once though. He took them and he thanked me. But you could see it. It was like he even begrudged the earth itself for what that child had to eat to keep alive. And I tried to persuade Jackson to take him to church, have him baptized. 'He's already named,' he said. 'His name is Jackson and Longstreet Fentry. Pa fit under both of them.' "

"He never went nowhere," Pruitt said. "Because where you saw Jackson, you saw that boy. If he had had to steal that boy down there at Frenchman's Bend, he couldn't 'a' hid no closer. It was even the old man that would ride over to Haven Hill store to buy their supplies, and the only time Jackson and that boy was separated as much as one full breath was once a year when Jackson would ride in to Jefferson to pay their taxes, and when I first seen the boy I thought of a setter puppy, until one day I knowed Jackson had gone to pay their taxes and I went up there and the boy was under the bed, not making any fuss, just backed up into the corner, looking out at me. He didn't blink once. He was exactly like a fox or a wolf cub somebody had caught just last night."

We watched him take from his pocket a tin of snuff and tilt a measure of it into the lid and then into his lower lip, tapping the final grain from the lid with delicate deliberation.



"You're lucky—I grew up during the ice age and a recession."

"All right," Uncle Gavin said. "Then what?"

"That's all," Pruitt said. "In the next summer him and the boy disappeared."

"Disappeared?" Uncle Gavin said.

"That's right. They were just gone one morning. I didn't know when. And one day I couldn't stand it no longer, I went up there and the house was empty, and I went on to the field where the old man was plowing, and at first I thought the spreader between his plow handles had broke and he had tied a sapling across the handles, until he seen me and snatched the sapling off, and it was that shotgun, and I reckon what he said to me was about what he said to you this morning when you stopped there. Next year he had the man helping him again. Then, about five years later, Jackson come back. I don't know when. He was just there one morning. And the man was gone again and him and his pa worked the place like they used to. And one day I couldn't stand it no longer, I went up there and I stood at the fence where he was plowing, until after a while the land he was breaking brought him up the fence, and still he hadn't never looked at me; he plowed right by me, not 10 feet away, still without looking at me, and he turned and come back, and I said, 'Did he die, Jackson?' and then he looked at me. 'The boy,' I said. And he said, 'What boy?' "

They invited us to stay for dinner.

Uncle Gavin thanked them. "We brought a snack with us," he said. "And it's 30 miles to Varner's store, and 22 from there to Jefferson. And our roads ain't quite used to automobiles yet."

So it was just sundown when we drove up to Varner's store in Frenchman's Bend village; again a man rose from the deserted gallery and came down the steps to the car.

It was Isham Quick, the witness who had first reached Thorpe's body—a tall, gangling man in the middle 40s, with a dreamy kind of face and near-sighted eyes, until you saw there was something shrewd behind them, even a little quizzical.

"I been waiting for you," he said. "Looks like you made a water haul." He blinked at Uncle Gavin. "That Fentry."

"Yes," Uncle Gavin said. "Why didn't you tell me?"

"I didn't recognize it myself," Quick said. "It wasn't until I heard your jury was hung, and by one man, that I associated them names."

"Names?" Uncle Gavin said. "What na——Never mind. Just tell it."

So we sat on the gallery of the locked and deserted store while the cicadas shrilled and rattled in the trees and the lightning bugs blinked and drifted above the dusty road, and Quick told it, sprawled on the bench beyond Uncle Gavin, loose-jointed, like he would come all to pieces the

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first time he moved, talking in a lazy, sardonic voice, like he had all night to tell it in and it would take all night to tell it. But it wasn't that long. It wasn't long enough for what was in it. But Uncle Gavin says it don't take many words to tell the sum of any human experience; that somebody has already done it in eight: He was born, he suffered and he died.

"It was pap that hired him. But when I found out where he had come from, I knowed he would work, because folks in that country hadn't never had time to learn nothing but hard work. And I knowed he would be honest for the same reason: that there wasn't nothing in this country a man could want bad enough to learn how to steal it. What I seem to have underestimated was his capacity for love. I reckon I figured that, coming from where he come from, he never had none a-tall, and for that same previous reason—that even the comprehension of love had done been lost out of him back down the generations where the first one of them had had to take his final choice between the pursuit of love and the pursuit of keeping on breathing.

"So he come to work for us. Until in the late fall, when the bottom got wet and we got ready to shut down for the winter, I found out he had made a trade with pap to stay on until spring as watchman and caretaker, with three days out to go home Christmas. And he did, and the next year when we started up, he had done learned so much about it and he stuck to it so, that by the middle of summer he was running the whole mill hisself, and by the end of summer pap never went out there no more a-tall and I just went when I felt like it, maybe once a week or so; and by fall pap was even talking about building him a shack to live in in place of that shuck mattress and a old broke-down cookstove in the boiler shed. And he stayed through that winter, too. When he went home that Christmas we never even knowed it, when he went or when he come back, because even I hadn't been out there since fall.

"Then one afternoon in February—there had been a mild spell and I reckon I was restless—I rode out there. The first thing I seen was her, and it was the first time I had ever done that—a woman, young, and maybe when she was in her normal health she might have been pretty, too; I don't know. Because she wasn't just thin, she was gaunted. She was sick, more than just starved-looking, even if she was still on her feet, and it wasn't just because she was going to have that baby in a considerable

"But you said to bring a friend."

less than another month. And I says, 'Who is that?' and he looked at me and says, 'That's my wife,' and I says, 'Since when? You never had no wife last fall. And that child ain't a month off.' And he says, 'Do you want us to leave?' and I says, 'What do I want you to leave for?' I'm going to tell this from what I know now, what I found out after them two brothers showed up here three years later with their court paper, not from what he ever told me, because he never told nobody nothing."

"All right," Uncle Gavin said. "Tell."

"I don't know where he found her. I don't know if he found her somewhere, or if she just walked in to the mill one day or one night and he looked up and seen her, and it was like the fellow says—nobody knows where or when love or lightning either is going to strike, except that it ain't going to strike there twice, because it don't have to. And I don't believe she was hunting for the husband that had deserted her—likely he cut and run soon as she told him about the baby—and I don't believe she was scared or ashamed to go back home just because her brothers and father had tried to keep her from marrying the husband, in the first place. I believe it was just some more of that same kind of black-complected and not extra-intelligent and pretty durn ruthless blood pride that them brothers themselves was waving around here for about a hour that day.

"Anyway, there she was, and I reckon she knowed her time was going to be short, and him saying to her, 'Let's get married,' and her saying, 'I can't marry you. I've already got a husband.' And her time come and she was down then, on that shuck mattress, and him feeding her with a spoon, likely, and I reckon she knowed she wouldn't get up from it, and he got the midwife, and the baby was born, and likely her and the midwife both knowed by then she would never get up from that mattress and maybe they even convinced him at last, or maybe she knowed it wouldn't make no difference nohow and said yes, and he taken the mule pap let him keep at the mill and rid seven miles to Preacher Whitfield's and brung Whitfield back about daylight, and Whitfield married them and she died, and him and Whitfield buried her. And that night he come to the house and told pap he was quitting, and left the mule, and I went out to the mill a few days later and he was gone—just the shuck mattress and the stove, and the dishes and skillet mammy let him have, all washed and

continued on page 86

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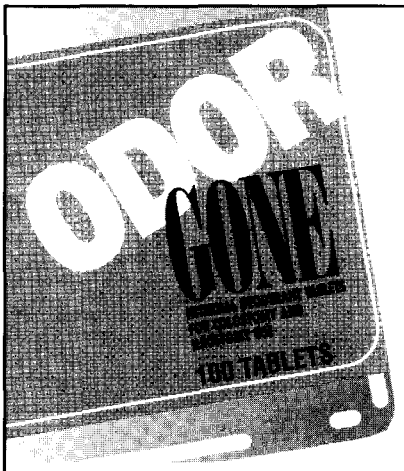

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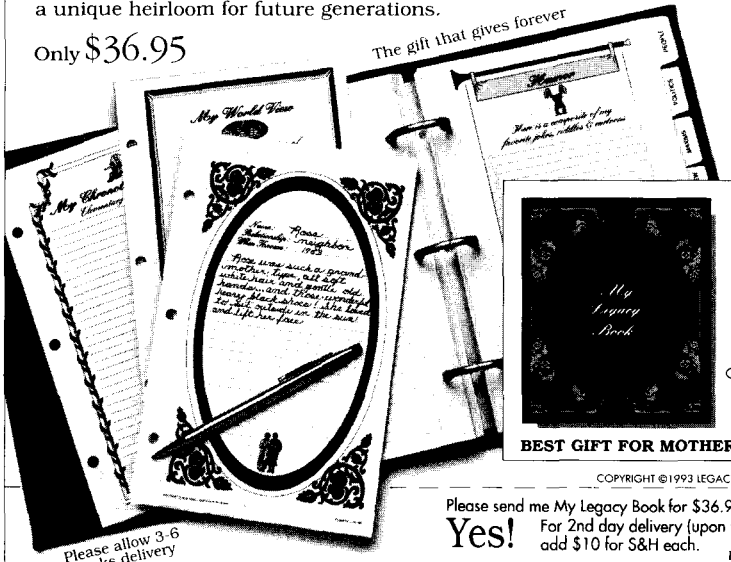

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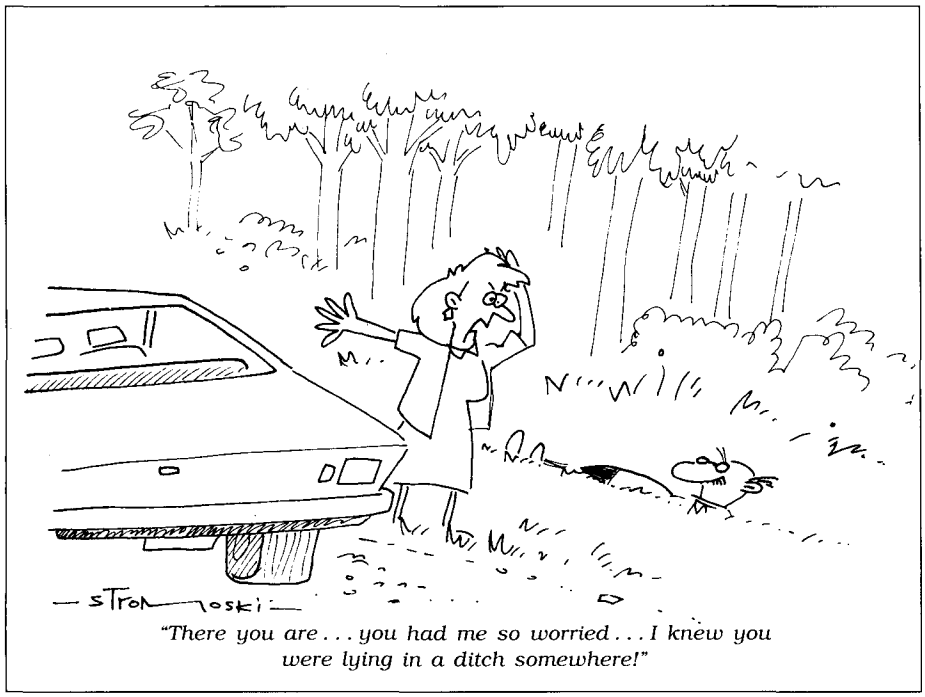

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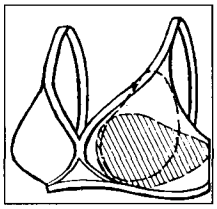

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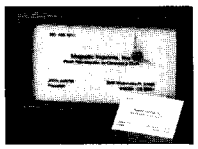

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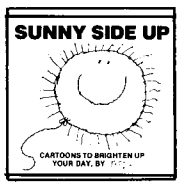

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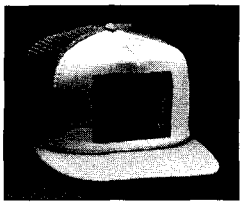
Sampler



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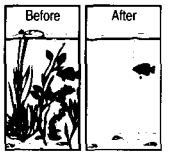

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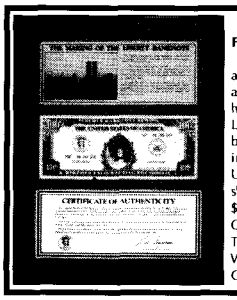

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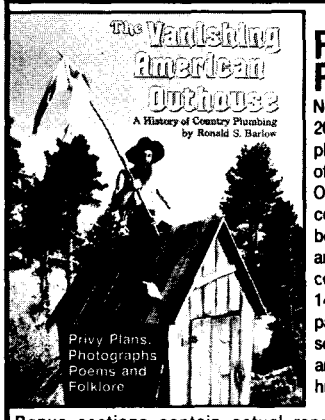
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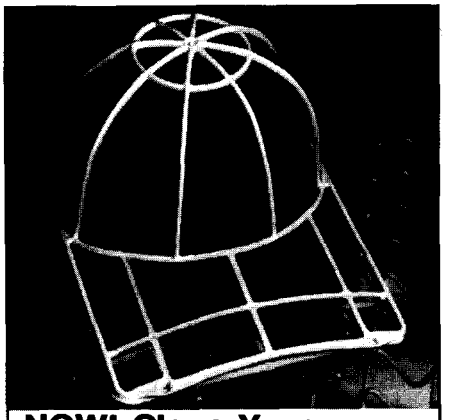

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Rush Limbaugh

continued from page 55

And it's a business that's paid off handsomely for Limbaugh, who reportedly earns $1-$5 million annually.

So much for the radio image. Contrasting his boisterous on-the-air personality is the real Rush Limbaugh—a soft-spoken man who appreciates the listeners who tune in each weekday. When meeting them in person, he looks them directly in the eye. His remarks are polite, punctuated with "Thank you" and "I'm honored you would take the time to say 'Hello.' "

Those who meet him come away with the feeling that this jolly media star (who's 30 pounds overweight by his own admission) is just a Midwest country boy at heart.

Rush Hudson Limbaugh III, 42, was born into a family of staunchly Republican lawyers. His grandfather, 102-year-old Rush H. Limbaugh (whom Rush affectionately calls "Pop"), was one of President Eisenhower's envoys to India. His uncle, Stephen Limbaugh, was appointed to a federal judgeship by former President Ronald Reagan.

But Rush demonstrated at an early age that he was cut from a different mold. When he was 20, Limbaugh dropped out of Southeastern Missouri State University to be a full-time disc jockey on KQV near Pittsburgh where he discovered his skills of satire. He especially delighted in playing pranks on his audience.

He once convinced his listeners that he had a picture phone and could spy on them, seeing everything they were doing at the moment. He even purchased a slip and two bras from the lingerie department at Gimbel's department store with his so-called "picture phone."

Some of his favorite put-ons were the times he called a sporting goods store and placed an order for a left-handed baseball bat, purchased slacks with a left-handed zipper from a discount clothing store, and attempted to rent flashbulbs from a camera shop.

Limbaugh has been sitting in front of a microphone ever since, except for a four-year stint as director of sales and special events for the Kansas City Royals Baseball Club. "That was not a high point in my life," he confesses. "I was going nowhere. I'm surprised I stayed there that long. I was not cut out for corporate conformity."

Sometimes Limbaugh can be serious, as when he speaks about the most influential source of his life and career. "I don't want any praise when I say this," he says, "but the primary influence on my life is Almighty God. Without God's influence in life, nothing else matters."

His broadcasts seem to cover a legion of topics, and he often sounds as though he nonchalantly reaches into a grab bag of opinions. Nevertheless, he never sits before a microphone unprepared. He subscribes to 15 magazines, reads nine newspapers a day, and cuts out clips every morning. Before he airs his views, he carefully formulates his position on each issue in a way that will make sense to his listeners.

Limbaugh's staunchest supporters aren't typical fans or "groupies." They approach discipleship. To them he is a messiah of conservatism who has the guts to say what they've been thinking for a long time. With the rapidly increasing popularity of his program, many realize for the first time they are not alone in their convictions.

Ironically, Limbaugh would be the

[redacted]

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last to claim he's a leader of any cause. "I'm more of a reflector of human thoughts. If there's any secret for my popularity, it's that I say what a lot of Americans would like to shout to liberal Washington politicians, if only they had the chance."

Shaping Up

continued from page 26

"When a sedentary person starts to exercise regularly, the fluid volume in their bloodstream expands. So just by dilution alone, it dilutes out the LDL values."

Also, the primary fuel for endurance exercise is fat. Exercise helps break down triglyceride particles and remove the fat from them. Some cholesterol from these triglyceride particles gets passed to the HDL particles and raises the HDL cholesterol levels, Thompson says.

"The average American male has an HDL level of 45," he notes. "A distance runner has a level of about 65. For every one- to two-point increase in your HDL level, there's a 2 to 4 percent reduction in your risk of heart disease."

"In a high percentage of cases, people who have heart attacks have either a low HDL cholesterol level or a high total cholesterol/HDL ratio," says physician Kenneth Cooper, executive director of the Aerobics Center in Dallas. These are the two factors that can be most directly improved, he says, by raising your level of aerobic fitness.

While exercise's effect on cholesterol varies with each individual, Cooper sums up these facts in his book, "Controlling Cholesterol":

1. Regular, brisk walking over a period of just a few months can significantly increase your HDL levels.

2. Moderate exercise (20 to 30 minutes, three times a week) may result in a significant increase in HDL levels.

3. There's a direct correlation between increasing levels of physical fitness and healthier HDL levels, and ratios of total cholesterol/HDL cholesterol.

4. Being physically sedentary may significantly lower a person's HDL cholesterol.

To improve your cholesterol profile, perform an aerobic exercise such as brisk walking or jogging three to four times a week for a minimum of 20 to 30 minutes for each session, says Cooper, who advises people over age 40 or those who have any risk factors of coronary disease to consult a physician before beginning a vigorous exercise program.

Home Computers

continued from page 57

her children that she was going to Nevada to stay with a man she met over a computer was another thing.

"I felt like I was her mother," says 38-year-old Marilee Oakes. "I was saying, 'I know you've talked to him on the computer and mentioned his name a few times but WHAT? He's coming up here? Or what? You're going down there?"

He calls Mrs. Oakes his "dream" and composed a poem for her on his computer:

"You came into my life by chance
and made my dream come true,
A dream that only you enhance, my
dream of loving you."

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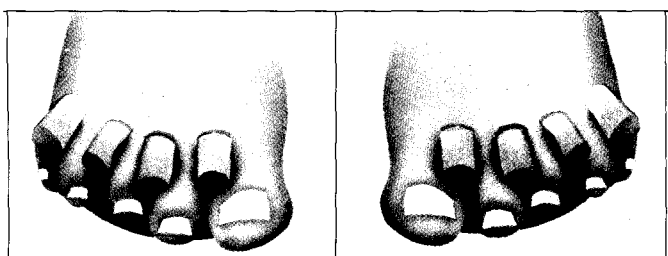

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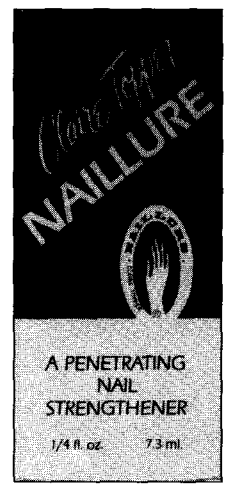

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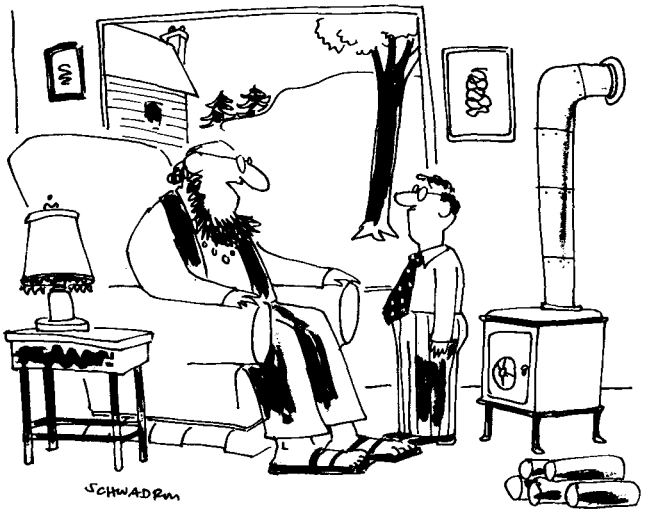
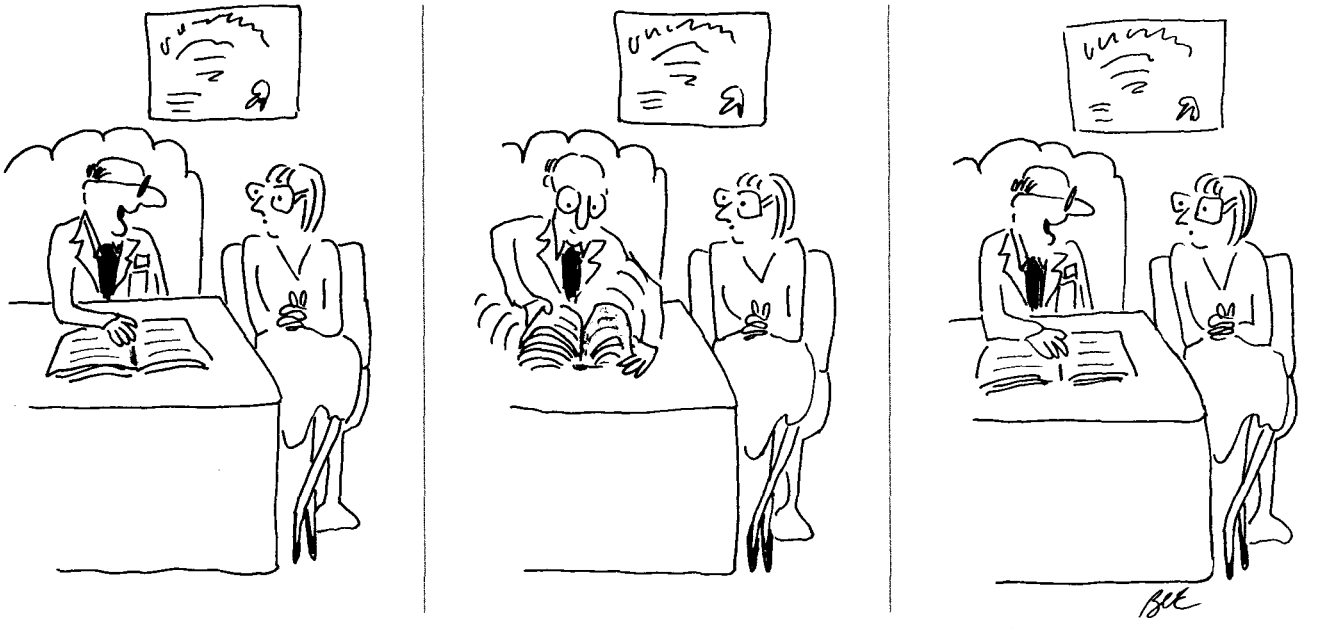


"I wish we could develop a better relationship, son. But the sad truth is that my generation doesn't trust anyone under 30."



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The Lure of LaCosta

Prepare to be pampered at this posh California getaway where the royal treatment includes everything from Spartan snacks to Roman baths.

BY CHERI DANIELS

Editor's note: *What's it like to spend a day at one of America's most luxurious watering holes? Are spas strictly for the rich and famous? The golf and tennis set? Travel writer Cheri Daniels visited Southern California's LaCosta to test the waters.*

LaCosta is for everyone. Depending on individual taste, a visitor can work out and eat like a Spartan or relax and luxuriate like a Roman.

Encompassing 400 acres of the most beautiful terrain under the world's sunniest skies, LaCosta is tucked in the heart of Southern California, 90 miles south of Los Angeles, and 30 miles north of San Diego, in Carlsbad.

As I stepped into the spa area, I knew what Alice felt when she walked through the looking glass. The gyms are equipped with the latest high-tech weight machines, and step classes, weight training, interval training, toning and aerobic water classes are on the daily menu. The Roman pools are the center attraction, enclosed in glass with high ceilings, complete with skylights. Can Cleopatra be far away?

The dress code for the Roman baths is no dress at all. Modest guests are advised to bring fig leaves. I decided not to take a Roman bath but to move on to the locker room to pick up a toga, slippers and lock up my personal items. (I suddenly wished I had borrowed a 5-carat zirconium ring as a prop for this occasion.)

At the far end of the spa I spotted another smorgasbord of sensations: rock steam rooms, inhalation rooms, steam cabinets, saunas, and Swiss showers. I am not personally partial to saunas or steam rooms, but the inhalation room was surprisingly nice. This is a steam room where the air is heavy with eucalyptus. It is the perfect place to take your next head cold.

Enough gaping. Let the day begin! The herbal wrap was first on my list

Camp LaCosta entertains children, ages 5 to 13, with tennis, swimming, kite flying, and field trips to Sea World. While parents enjoy leisurely dinners at the spa, kids participate in lively parties with such themes as Fiesta, Little Italy, and California Night. Writer Cheri Daniels lines up a putt on LaCosta's links.

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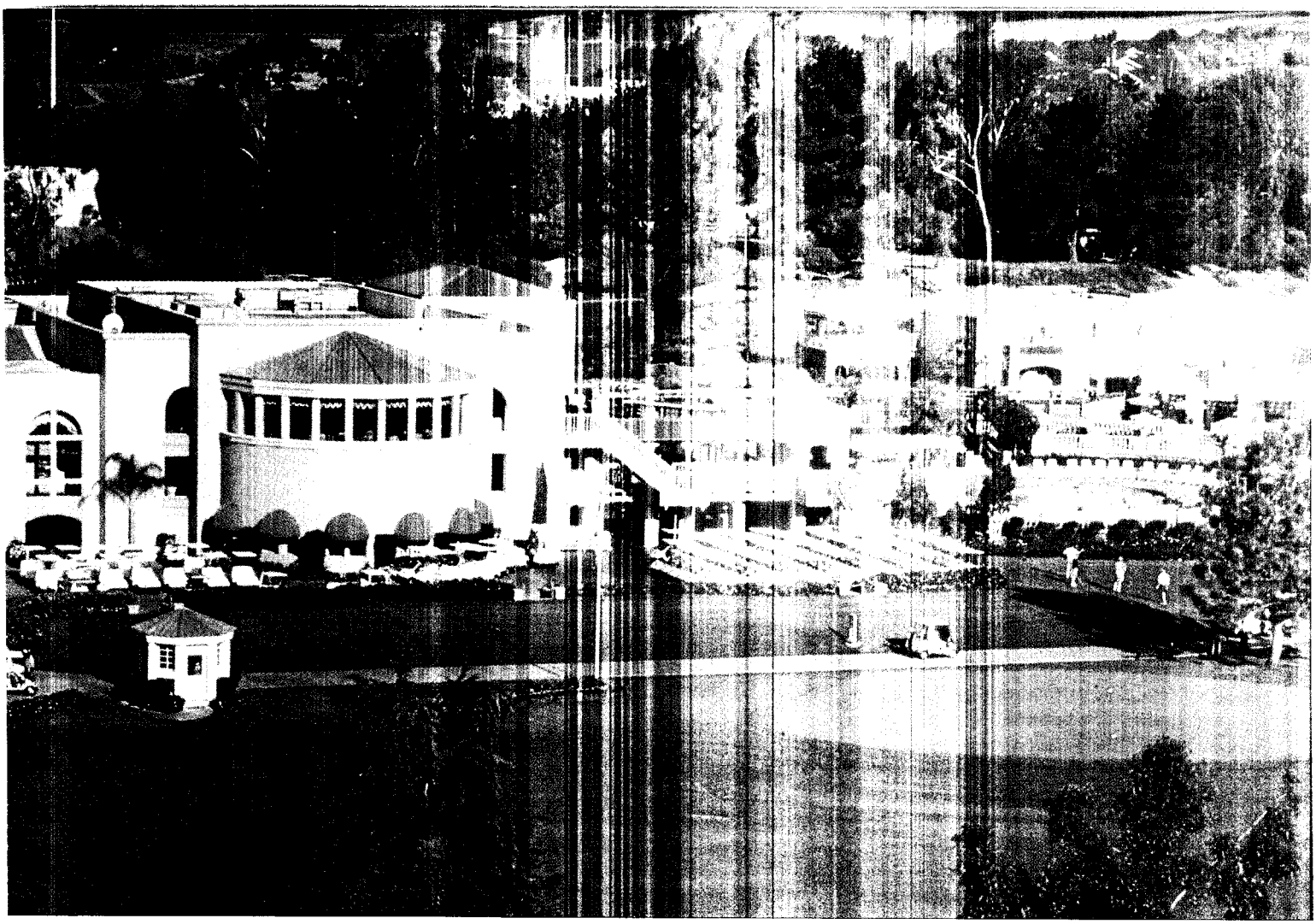
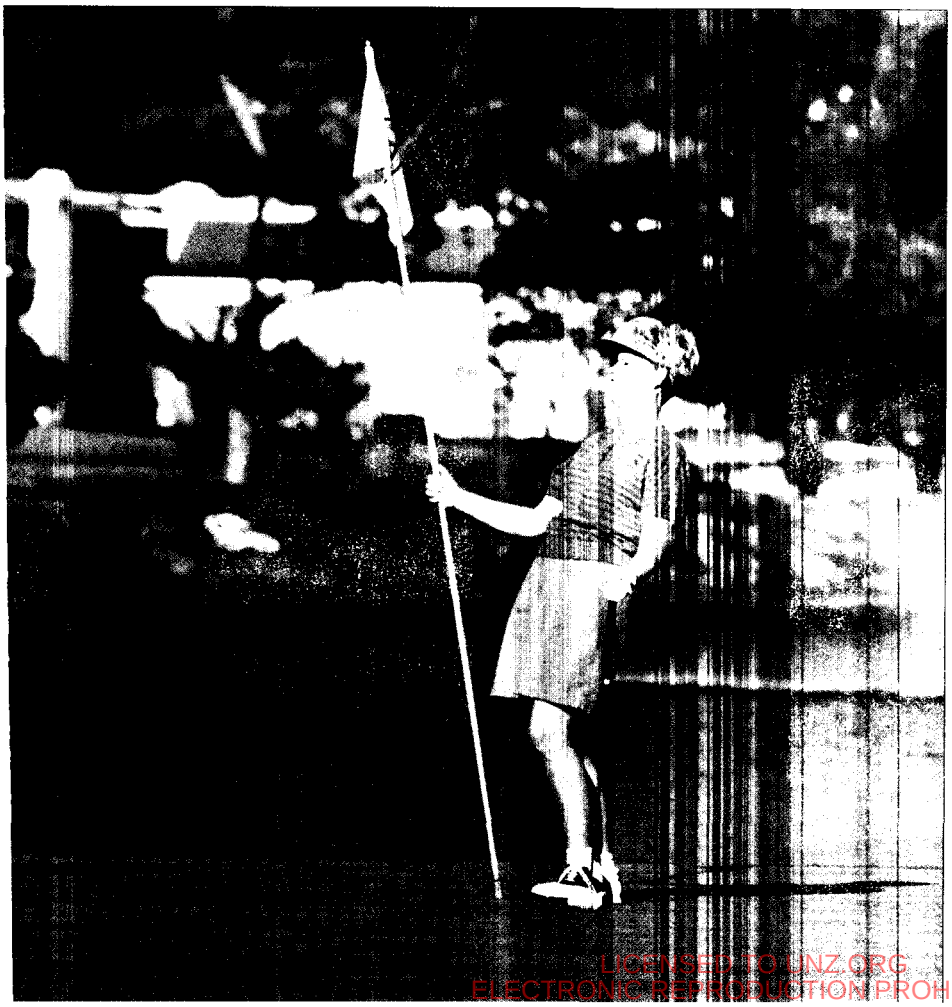
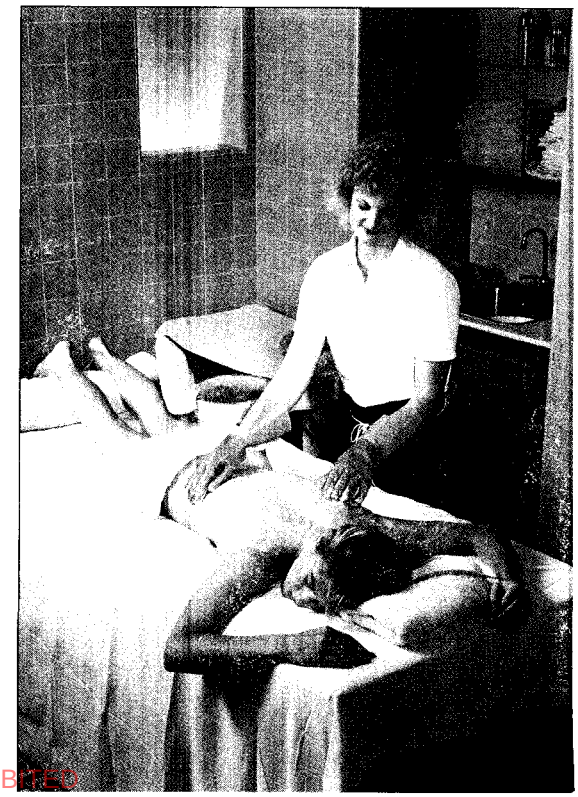




Plans to promote quick, ... eliminate excess fat and ... in a short time, reappear. ... instructors create personally ... programs that generate fresh appreciation for nutrition, exercise, and stress management.



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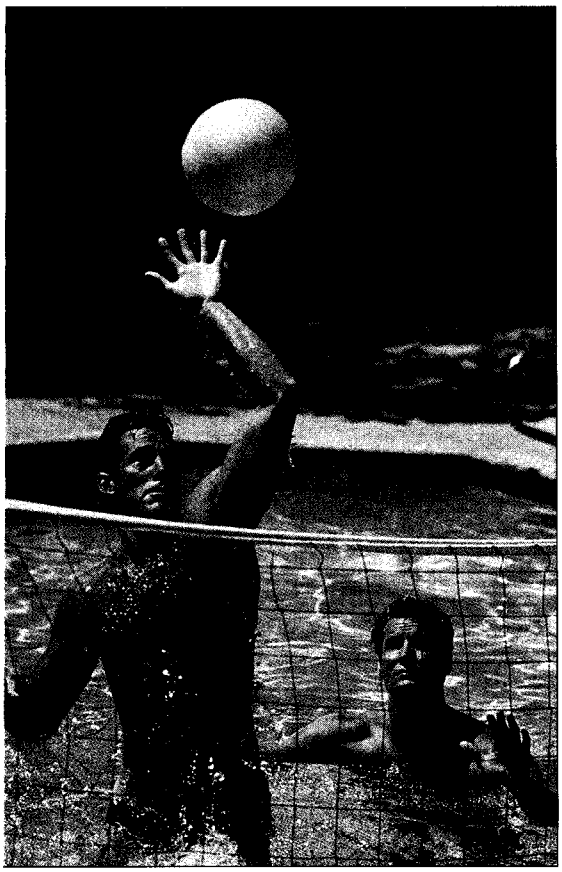
of experiments. "Designed to soothe tired muscles, improve circulation and renew energy by wrapping the entire body with warm herbal-saturated linen sheets . . ." so reads the wrap description in the brochure of spa services. Donning my terry cloth robe and my slippers, I made my way to the "wrap area," a dimly lit room containing several beds and a fireplace. Again, leave your modesty at home. Attempting a carefree smile to my wrapmates, I climbed onto a bed, in my altogether, and was promptly mummified in steaming, herb-soaked sheets.

Over the sheets go a heavy plastic tarp and layer after layer of warm blankets. At this point I briefly contemplated panic. Some first-time clients have been known to get a touch of claustrophobia. A washcloth that had been soaked in ice and placed on the forehead banished the discomfort in a wave of refreshment. The lights were turned off and sitar music turned on, and the tamales were left to doze in the wrap for exactly 17 minutes.

As I rejoined the living, I took note that an attendant had maintained a silent vigil in the room just in case a whim required satisfaction. At this point, I should state that I did not go to LaCosta only to be pampered. I consider myself fitness-minded (my husband's single-digit body fat and his arduous workout regimen serve as an incentive), and I was eager to get some hard exercise. I thought the classes would be somewhat familiar to an old pro like myself, but my first workout was anything but familiar.

For one thing, Aquathinics takes place entirely in a swimming pool and is designed to tone the body with the help of state-of-the-art resistance equipment. This class made me want to jump in the pool daily and work out. The weights are used under the water, thereby delivering maximum effort. Instead of being drenched with sweat and breathing heavily, you emerge refreshed.



Each of the three LaCosta programs—weight management, stress release, and health week—lasts seven days and costs about $3,000. For more information, call 1-800-854-5000.

Avoiding the Four-Letter Word

Vikki Kleckner, LaCosta's program coordinator who looks 10 years younger than her age, is a crusading evangelist for a health-conscious lifestyle. With the uninhibited enthusiasm of a high school cheerleader, she builds a strong case for attitude change.

"It's not what you do here that's important," she says, "it's what you take home with you."

Vikki refuses to use the word diet. "We avoid that four-letter word," she emphasizes. "A diet implies giving up something. Few of us want to give up anything—even if it's harmful. We stress replacements." If, for example, your passion is (horrors!) french-fried potatoes, no problem. Vikki and her staff prepare a batch of fat-free fries that rank among the best-tasting snacks this side of Richard Simmons.

"Tell me what you typically eat, and I'll show you how to make it better," promises Karen Ladman, the spa's dietitian.

Pancakes? Why not? By substituting nonfat milk for whole milk, apple juice for sugar, vanilla for salt, and using only egg whites instead of the whole egg, you turn a normally high-fat breakfast into a hearty, healthy meal with only 65 calories.

* * *

Oatmeal Pancakes

(Makes 10 to 12 4-inch pancakes)

1 cup oatmeal (no salt added)
1⅛ cups skim milk or fruit juice
½ cup whole wheat or oat flour
1 tablespoon baking powder
2 tablespoon apple juice concentrate
3 egg whites (beaten)
1 tablespoon vanilla

Mix oatmeal with milk or juice. Stir in the flour, baking powder, apple juice concentrate, vanilla, and any chopped or puréed fruit. Beat egg whites until foamy (beating until stiff will make them more fluffy) and add them to mixture. Spray griddle with nonfat cooking spray. Use 1¼ cup batter for each pancake. Bake pancakes on a hot griddle, turning when the top is bubbly and the edges slightly dry.

Per Serving (1 pancake):
Calories: 58 Carbohydrate: 10.2 gm
Cholesterol: trace Protein: 2.9 gm
Sodium: 111 mg Fat: 0.35 gm
Diabetic exchange (3 pancakes): 2 bread

* * *

Fruit Toppings

Applesauce: quarter and core apples. Leave skin on. For microwave, add a few tablespoons of water to apples and cook covered on high until apples are very soft and bubbly. Time depends on number of apples. For stove top, put apples into covered pan with ¾" of water. Cook until soft. When cooked, put apples with the skin into a blender, add a couple of squirts of fresh lemon, some cinnamon or nutmeg, and purée.

* * *

LaCosta Energizer

¼ cup cooked Kashi (a name-brand cereal with seven different grains)
¼ cup cooked oatmeal
1 tablespoon apple butter or puréed fruit
1 tablespoon raisins
Sprinkling of oat bran

When cooking Kashi, use twice as much liquid as dry Kashi. For added flavor, apple juice and ½ apple may be substituted for water. Allow 40 minutes cooking time. When cooking oatmeal, use twice as much liquid. Allow five minutes for cooking. The oatmeal and Kashi can be combined following cooking and stored in refrigerator five days and reheated in microwave as needed.

Per Serving:
Calories: 154 Carbohydrate: 32.4 gm
Cholesterol: 0 mg Protein: 3.5 gm
Sodium: 3 mg Fat: 0.9 gm
Diabetic exchange: 1 bread + 1 fruit + trace of fat

—By John McCollister

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Leaving the pool area, I spoke with Martha, a teacher from nearby Orange County. This was her second trip to LaCosta, and on her veteran authority I signed up for a Loofah (salt glo) treatment. This gentle rubbing process uses a combination of special salts and bath gels to remove the outer layer of skin cells for a rejuvenating and healthy glow.

I can't imagine the number of LaCosta's daily facials or Swedish massages; it seemed that every woman I spoke with was having one or both. A traditional Swedish massage was among the few such treats I had enjoyed before, so I opted for something different . . . a "Shiatsu."

In preparation for the Shiatsu massage, I was given a 20-minute milk whirlpool bath. The attendant heats up the whirlpool, adds the bubble fragrance of your choice and plops you in for a 20-minute soak. Ahhh. . . .

Exiting the tub, I was introduced to the rigors and pleasures called Shiatsu. This involved 60 minutes of full-body massage, using acupressure techniques to aid circulation and relaxation.

My masseuse told me to breathe deeply during the massage and if she exerted too much acupressure just to tell her. Shiatsu is not your routine backrub. There were times when I thought I might jump off the table.

Relaxing is not easy under these circumstances, but I did my best. All my sore muscles were attended to, and I felt limp when the hour was up.

To me, LaCosta is perfect, but I spoke to the spa director, Jessie Feria, who seems to spend seven days a week revamping current programs. Feria told me that there are four components to the LaCosta program: nutrition, fitness training, beauty, and lifestyle change.

One great appeal here is that all components for a perfect stay are in one location. Not only do you have the spa, but there are also two PGA championship golf courses, 23 tennis courts, six restaurants, three lounges, and the largest rear-screen projection theater found at any resort.

So, if you want to get away from it all, be pampered, and yet not ruin your diet or your fitness schedule, by all means give LaCosta a try. I enjoyed it so much that my husband has given me a birthday present of another stay there. This is one birthday I will actually look forward to.

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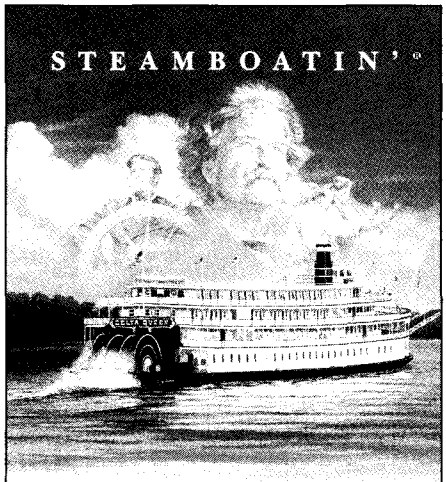

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OUT OF THE MAINE STREAM

Leave your wristwatch and identity at the gate; you're about to become part of post-Civil War America, as you experience a 70-hour dose of New England history.

by Carolyn Hughes Crowley

In front of the 19th-century ancestral home of a distinguished Maine family, I met my long-dead family members. The year was 1870, I was told, as I greeted my kinfolk and tried to remember everyone's name—including my own.

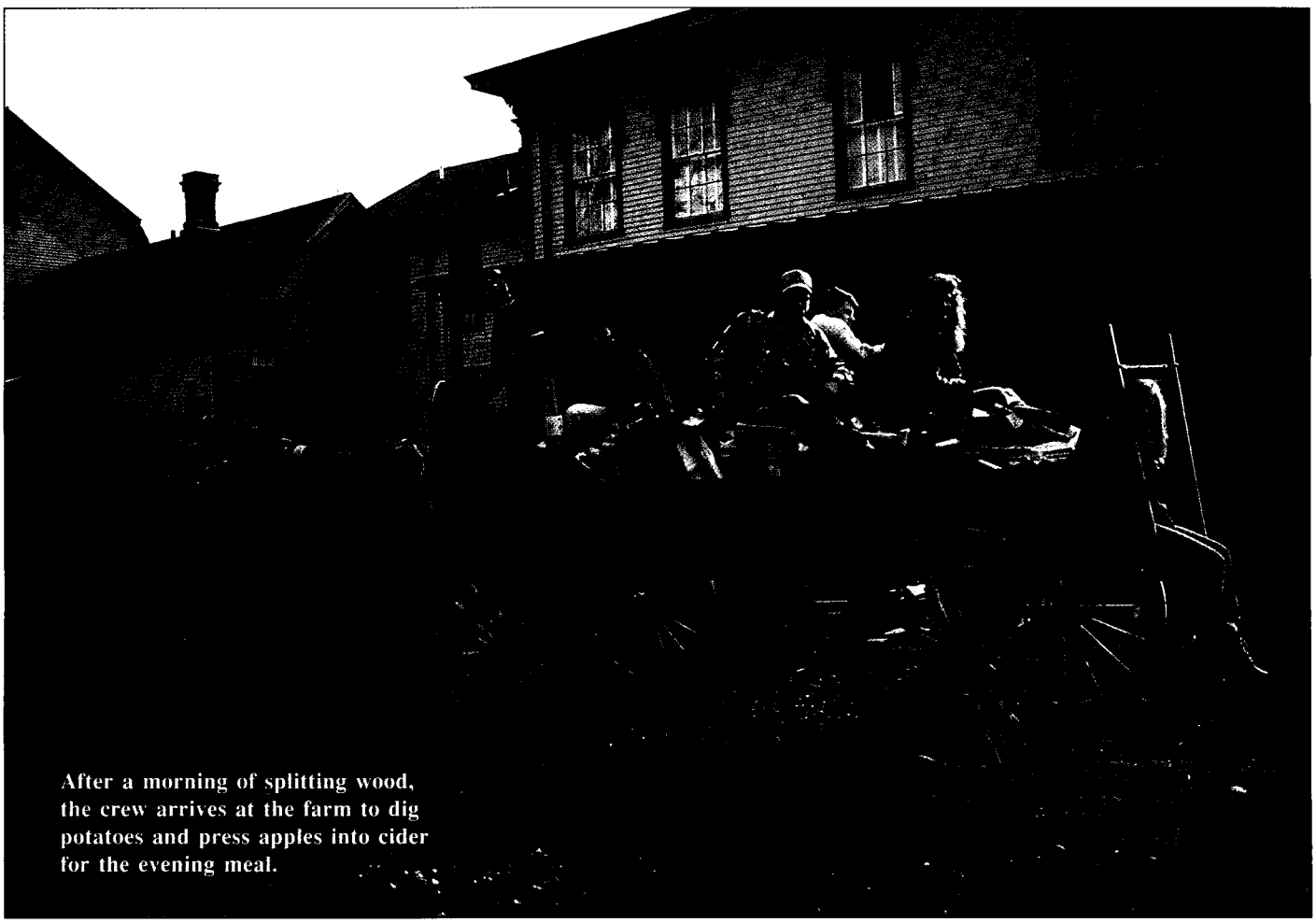
"Ma Pray [now *that* name would take getting used to because in real life I have no children], let me introduce you to your family," said Gabby Bimmon, my 20th-century guide. Wayne Bryant stepped forward in his newly adopted 19th-century role as my husband, Otis. He was a millwright, farmer, and captain of the Livermore (Maine) Cavalry company. He also had died in 1874 at age 85.

"Here are your sons Otis Junior and Albert, who just returned injured from the Civil War. Rosetta Chandler, your daughter, is here, too—step forward, Rosetta—down from potato country. Meet Bethiah Brig, your married teacher daughter. And here's your granddaughter Beth, a good scholar."

Comfortable with our new identities, my "family" and I walked to a hillside cemetery at dusk to visit our characters' graves and to learn our history. Ma Pray, I discovered from her weathered tombstone, was Eliza, who married Otis when her sister, his first wife, died. Eliza lived 71 years, dying in 1877.

We ambled back to the farmhouse, armed with our historical roots and careful not to divulge our 20th-century personalities. We took our sleeping bags and gear to our bed chambers and lay them on our feather beds. Claiming kerosene lamps, we returned downstairs for a dinner of corn chowder and applesass (applesauce). Everyone waited politely to begin until after Pa had eaten the first morsel.

Except for "Please pass this, please pass that," a nervous silence reigned until Aunt Ora, our hostess in gingham, heard a knock on the door. "Probably a critter," she said. "They get hungry this time of year." It was stooped-over Mercy Lovejoy, leaning heavily on her cane and trying to hide



After a morning of splitting wood, the crew arrives at the farm to dig potatoes and press apples into cider for the evening meal.

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her face with the wings of her black bonnet. Nevertheless, she suspiciously resembled Gabby. She had walked over from the poor farm to complain that she had "no victuals at all. I'm cold and the table's full. I'm plumb put out."

Poor Mercy. She shared gossip about Jesse Atkins' "crossing the dark river" (dying) from diphtheria at age 84. His false teeth were to go to her, she explained. "It will be better than gumming my victuals." Soon she was in tears, sobbing because she was worried about her fate. Indigent bodies were sold for $100 to the medical college for research, she sniffed.

After Mercy's departure (much appreciated), silence resumed until bespectacled hired hand Wallace spoke. He was a religious young man, farming and studying for the bar exam.

"A man in New York won $100,000 in the lottery, but Maine folks are not interested in progress," Wallace said. He then talked about the ongoing Franco-Prussian War, the Cuban insurrection, prejudices ("the Irish hate the Irish"), the just-passed 15th Amendment, and recently published books (*Alice in Wonderland*, *Uncle Tom's Cabin*).

After supper, we washed the dishes with a chain-link pot scrubber and hot water from a kettle. Conversation was becoming easier because now my "family" could talk about the evening meal, Mercy Lovejoy, and the "sociable" that Aunt Ora had mentioned. The dialogue and activity added to the authenticity of our role playing. No longer did we feel we were outsiders but were part of the farmstead—Norlands Living History Center—and the social, political, agricultural, religious, cultural, and educational life of 1870. Ulysses S. Grant is president; the country has just bought Alaska from Russia for $7 million; and one in seven women dies in childbirth.

Norlands, whose name comes from the mention of northlands in Tennyson's "Ballad of Oriana," allows only two concessions to modern times: toilet paper and window screens. Gabby asked guests to leave their wristwatches, cigarettes, and flashlights behind. Wastebaskets are taboo because nothing was thrown away in 1870. Frugality was the hallmark of the traditional New England rural farm family.

Thrift was particularly important in the kitchen. The apple peels were boiled down to red applesauce, and dinner's main course reappeared in the next morning's hash. Breakfast's leftover toast showed up as dinner's bread-and-apple pudding.

We learned that Norlands originally was the home of one of the great political dynasties of the United States. The seven Washburn family sons, at whose cottage we were doing daily and seasonal farm and household work, in 1870 achieved a record in one generation unequaled in our country to this day. Four of the brothers were members of Congress from various states, three of them simultaneously. Others made their marks as governors, foreign ministers, a Navy captain, a Civil war general, a Secretary of State, an editor crusading for abolition, and a close associate of Lincoln.

History lesson aside, we were on the premises to work. One morning after our early chores, we went by carriage to a yard where ash, white and golden birch, and maple logs had been twitched and stacked the previous year. There we cut the logs into three pieces, each 16 inches long, and split the wood. We delivered a wagon

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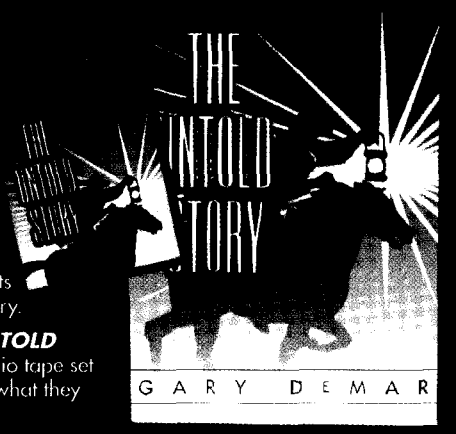

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Write Norlands Living History Center, R.D. 2, Box 3395, Livermore Falls, Maine 04254; (207) 897-2236. Fly Continental Airlines to Portland, then drive a rented car 50 miles north to Norlands or arrange for transportation with the center ($55 round trip from the airport).

Each of the eight three-day live-ins a year has a main chore:

* **February**—cutting ice and wood.
* **April**—tilling soil, boiling syrup, spreading manure and field preparation for planting crops.
* **May**—similar to April but more outdoor work.
* **July**—cultivating, weeding, haying; August—harvesting.
* **September**—pulling dry beans and digging potatoes.
* **October**—harvesting during foliage, harrowing ground for winter.
* **November**—cutting and splitting wood.

Cost is $195 for adults, half price for children 8-12, teens $150.

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load to a neighbor because "we borrowed some of his farm equipment earlier," Wallace explained. Then we filled the wagon again to transport logs to Norlands' woodpile.

In the afternoon we dug red and white potatoes. "It was a bad year," Wallace said, comforting us when he saw how disappointed we were after digging a long way and finding nothing but an occasional worm.

We were more successful making apple cider with the double press from juicy, sweet Macintosh apples. We filled a five-gallon jug and drank this cider at every meal. We were proud, too, when we wove 16 inches of simple tabby weave on the two-harness loom. Each of us pulled hard on the beater bar, as Aunt Ora instructed.

"If you don't beat hard you can see daylight through the rug and you know it will collect dirt and the rug won't last long," she said.

Doing women's work in the afternoon (we alternated with barn and field work), we "picked and teased wool, spreading it to a fluff like a cloud," Aunt Ora said, then carded it to get all the fibers going in one direction to make rovings for spinning on the walking wheel. Later, at a quilting bee, we tacked and rolled a quilt and then, to harmonica music, we do-si-doed in line and square danced.

A visit to Norlands District #7 school, built in 1823, introduced us to Miss Esther Weld, schoolmarm and local abolitionist. "Make your manners," she lectured us as we filed into class. "Boys bow, girls curtsy. I have good governance at all times."

Miss Weld arranged us in the straight-back benches by age, the four-year-olds in front and the 16-19-year-olds in the back. The girls were on one side of the wood-burning stove, the boys on the other.

"It's the first day of the winter term, scholars. In the winter term there might be 60 scholars, three to a bench. The one on the end would be writing on his lap, but he wouldn't mind because he'd be learning," she said. The school day began at 9 a.m. and concluded at 4 p.m., six days a week. Miss Weld received $5.50 a month, plus room and board. A schoolmaster would earn three times that amount, she grumbled.

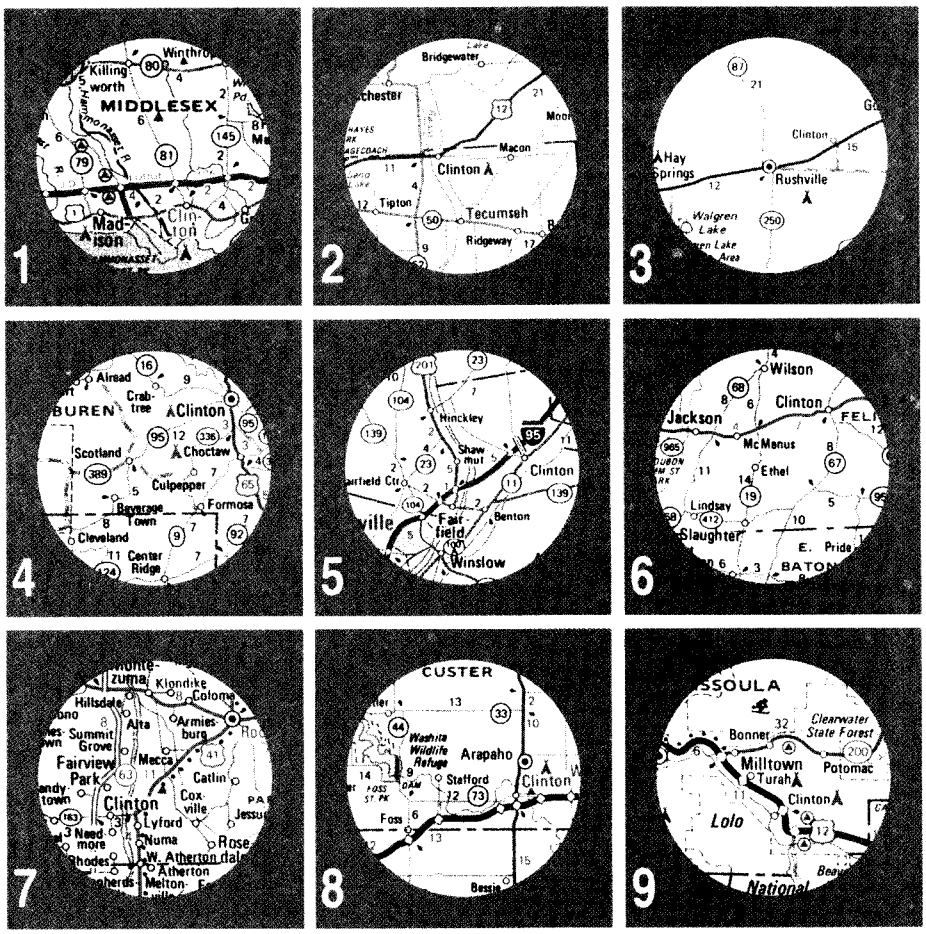
To read and recite our lessons, we came forward "toes touching the same crack in the floor and face me," Weld commanded us. "Answer in complete sentences and finish each answer with 'ma'am.'" We had a spelling bee (saleratus, cinnamon, and firkin sent some scholars back to their seats), did arithmetic "which will strain young women's minds," listened to a moral lesson "to quiet you down after nooning" (one-hour dinner break), and worked on our penmanship.

The school day ended with gentle praise. "You have been forward and bright," said Miss Weld.

Even with difficult chores and taxing lessons, our 70-hour glimpse of history passed quickly. In the closing circle before we left Norlands, each participant revealed his or her 20th-century identity. My daughter Rosetta (actually Annette Benjamin, a 24-year-old freshman psychology student at the University of Maine) said, "This was much harder than the way I live. I have nothing to complain about."

Our experiences showed "what our forefathers' and mothers' lives were like, the conditions they lived under, their sacrifices, the dependency of the family members on each other, and family cooperation," said Crystal Montgomery (Gabby and Mercy Lovejoy), retired director of a program for disadvantaged teenagers at Keane State College in New Hampshire.

Norlands' new director, Curt Bonney, 36, explained the mission: "Our objective is for people to appreciate the past and what they have now and to make the past as real as possible and to teach the traditional New England culture that's fast passing."



Where do you think you are?

East or West, North or South, each of the distinctive areas above appears on the map of a single city, state, or province. In terms of routes, state parks, mountains, and memorials, there is, as the saying goes, "no place like it." Can you identify these locations? If you find the game too easy (but you won't), try to guess the theme of this month's map game.

(Answers on page 103)

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Tomorrow

continued from page 70

clean set on the shelf. And in the third summer from then, them two brothers, them Thorpes——"

"Thorpes," Uncle Gavin said. It wasn't loud. It was getting dark fast now as it does in our country, and I couldn't see his face at all anymore. "Tell," he said.

"Black-complected like she was—the youngest one looked a heap like her—coming up in the surrey, with the deputy or bailiff or whatever he was, and the paper all wrote out and stamped and sealed all regular, and I says, 'You can't do this. She come here of her own accord, sick and with nothing, and he taken her in and fed her and nursed her and got help to born that child and a preacher to bury her; they was even married before she died. The preacher and the midwife both will prove it,' And the oldest brother says, 'He couldn't marry her. She already had a husband. We done already attended to him.' And I says, 'All right. He taken that boy when nobody come to claim him. He has raised that boy and clothed and fed him for two years and better.' And the oldest one drawed a money purse half outen his pocket and let it drop back again. 'We aim to do right about that, too—when we have seen the boy,' he says. 'He is our kin. We want him, and we aim to have him.' And that wasn't the first time it ever occurred to me that this world ain't run like it ought to be run a heap of more times than what it is, and I says, 'It's 30 miles up there. I reckon you all will want to lay over here tonight and rest your horses.' And the oldest one looked at me and says, 'The team ain't tired. We won't stop.' 'Then I'm going with you,' I says. 'You are welcome to come,' he says.

"We drove until midnight. So I thought I would have a chance then, even if I never had nothing to ride. But when we unhitched and laid down on the ground, the oldest brother never laid down. 'I ain't sleepy,' he says. 'I'll set up a while.' So it wasn't no use, and I went to sleep and then the sun was up and it was too late then, and about middle morning we come to that mailbox with the name on it you couldn't miss, and the empty house with nobody in sight or hearing neither, until we heard the ax and went around to the back, and he looked up from the woodpile and seen what I reckon he had been expecting to see every time the sun rose for going on three years now. Because he never even stopped. He said to the little boy, 'Run. Run to the field to grandpap. Run,' and come straight at the oldest brother with the ax already started, until I managed to catch it by the haft just as the oldest brother grabbed him and we lifted him clean off the ground, holding him, or trying to. 'Stop it, Jackson!' I says. 'Stop it! They got the law!'

"Then a puny something was kicking and clawing me about the legs; it

Can you name this picture?

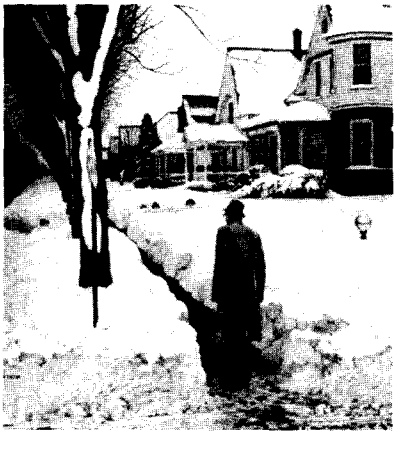
. . . contest: *The Saturday Evening Post* will award $100 to the author of the winning caption for this picture. Your entry must be a limerick of exactly five lines.

Send your entry on a postcard. Entries will not be returned. Enter as many times as you wish.

Send entries to: Limerick Contest, *The Saturday Evening Post*, 1100 Waterway Blvd., Indianapolis, IN 46202.

All eligible caption entries must be postmarked by July 2, 1993.

The winner of the May/June 1993 contest will be announced in the Sept./Oct. 1993 issue.



Our congratulations and a check for $100 go to Owen E. Humphrey of Granite City, IL, for the winning entry in our Jan./Feb. 1993 caption contest.

The path to his house is not far,
But the scene up ahead is bizarre.
To proceed without heed
Is foolhardy, indeed—
How he wishes he'd driven the car!

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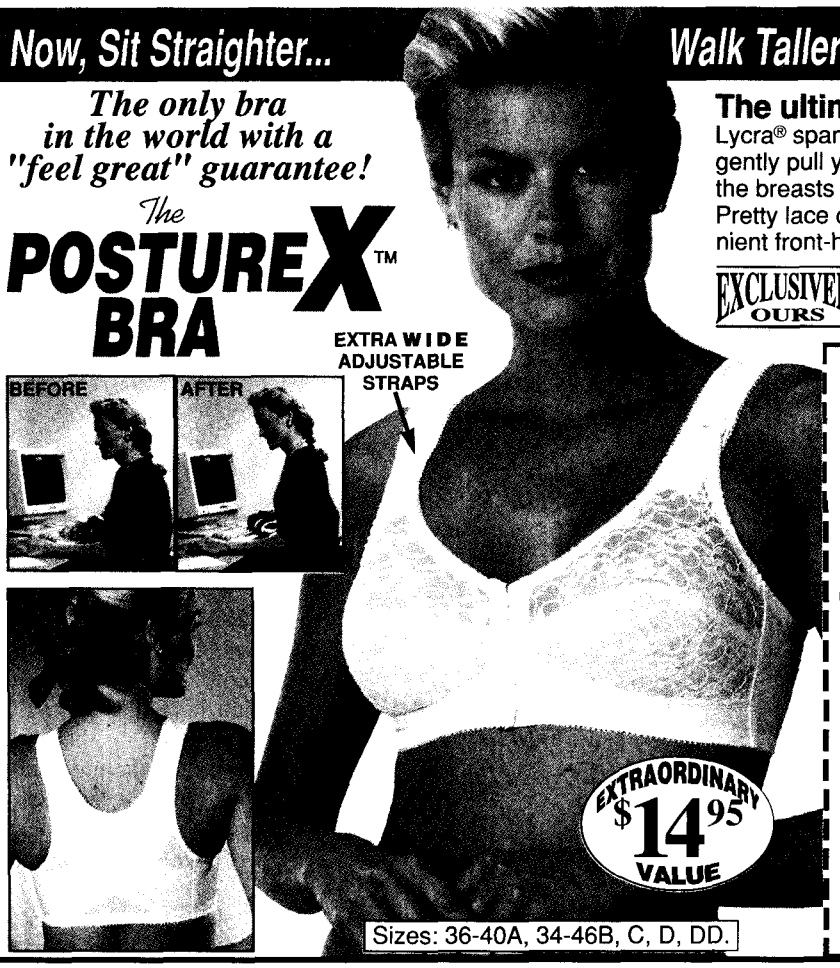

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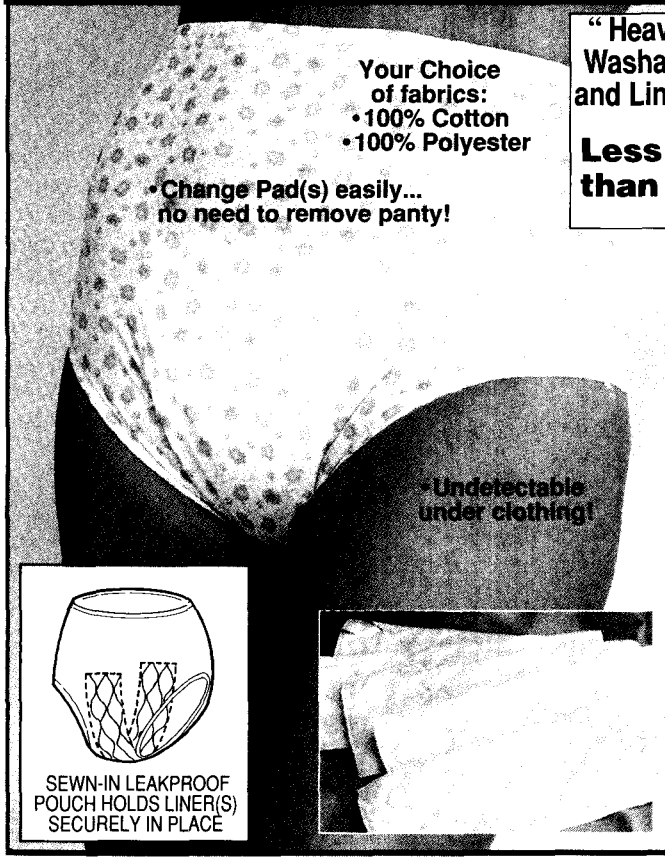
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was the little boy, not making a sound, just swarming around me and the brother both, hitting at us as high as he could reach with a piece of the wood Fentry had been chopping. 'Catch him and take him on to the surrey,' the oldest one says. So the youngest one caught him; he was almost as hard to hold as Fentry, kicking and plunging even after the youngest one had picked him up, and still not making a sound, and Fentry jerking and lunging like two men until the youngest one and the boy was out of sight. Then he collapsed. It was like all his bones had turned to water, so that me and the oldest brother lowered him down to the chopping block like he never had no bones a-tall, laying back against the wood he had cut, panting, with a little froth of spit at each corner of his mouth. 'It's the law, Jackson,' I says. 'Her husband is still alive.'

" 'I know it,' he says. It wasn't much more than whispering. 'I been expecting it. I reckon that's why it taken me so by surprise. I'm all right now.'

" 'I'm sorry for it,' the brother says. 'We never found out about none of it until last week. But he is our kin. We want him home. You done well by him. We thank you. His mother thanks you. Here,' he says. He taken the money purse outen his pocket and put it into Fentry's hand. Then he turned and went away. After a while I heard the carriage turn and go back down the hill. Then I couldn't hear it any more. I don't know whether Fentry ever heard it or not.

" 'It's the law, Jackson,' I says. 'But there's two sides to the law. We'll go to town and talk to Captain Stevens. I'll go with you.'

"Then he set up on the chopping block, setting up slow and stiff. He wasn't panting so hard now and he looked better now, except for his eyes and they was mostly just dazed looking. Then he raised the hand that had the money purse in it and started to mop his face with the money purse, like it was a handkerchief; I don't believe he even knowed there was anything in his hand until then, because he taken his hand down and looked at the money purse for maybe five seconds, and then he tossed it—he didn't fling it; he just tossed it like you would a handful of dirt you had been examining to see what it would make—over behind the chopping block and got up and walked across the yard toward the woods, walking straight and not fast, and not looking much bigger than that little boy, and into the woods. 'Jackson,' I says. But he never looked back.

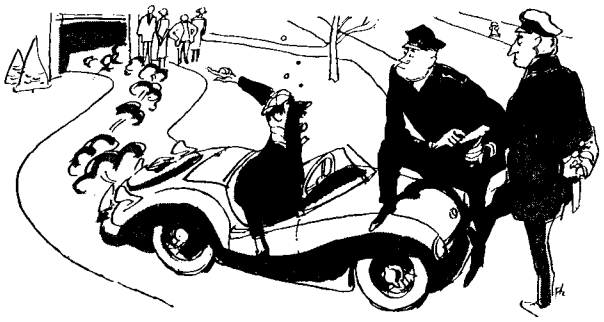
"And I stayed that night at Rufus Pruitt's and borrowed a mule from him; I said I was just looking around, because I didn't feel much like talking to nobody, and the next morning I hitched the mule at that gate and started up the path, and I didn't see old man Fentry on the gallery a-tall at first.

"When I did see him he was moving so fast I didn't even know what he had in his hands until it went 'boom!' and I heard the shot rattling in the leaves overhead and Rufus Pruitt's mule trying his durn best either to break the hitch rein or hang hisself from the gatepost.

"And one day about six months after he had located here to do the balance of his drinking and fighting and sleight-of-hand with other folks' cattle, Bucksnort was on the gallery here, drunk still and running his mouth, and about a half dozen of the ones he had beat unconscious from time to time by foul means and even by fair on occasion, as such emergencies arose, laughing every time he stopped to draw a fresh breath. And I happened to look up, and Fentry was setting on his mule out there in the road.

"He was just setting there, with the dust of them 30 miles caking into the mule's sweat, looking at Thorpe. I don't know how long he had been there, not saying nothing, just setting there and looking at Thorpe; then he turned the mule and rid back up the road toward them hills he hadn't ought to never have left. Except maybe it's like the fellow says, and there ain't nowhere you can hide from either lightning or love. And I didn't know why then. I hadn't associated them names. I knowed that Thorpe was familiar to me, but that other business had been 20 years ago and I had forgotten it until I heard about that hung jury of yourn. Of course he wasn't going to vote Bookwright free.... It's dark. Let's go to supper."

But it was only 22 miles to town now, and we were on the highway now, the gravel; we would be home in an hour and a half, because sometimes we could make 30 and 35 miles an hour, and Uncle Gavin said that someday all the main roads in Mississippi would be paved like the streets in Memphis and



You Be the Judge

by Bruce M. Jones

After one drink too many with visitors to his home, Jack hopped into his new sports car and raced it back and forth on the garage driveway to demonstrate its pickup. The performance attracted a policeman, who arrested Jack for driving while intoxicated.

"The law against driving while intoxicated obviously applies only on public streets, for the protection of others who may be driving or walking on the street," Jack argued at his trial. "Certainly it doesn't cover driving in my own driveway."

"The law very clearly prohibits 'driving while intoxicated' and that would appear to mean driving anywhere," the prosecutor replied. "It makes no exceptions of any kind."

If you were the judge, would you convict Jack?

Jack was convicted. The court said it would be absurd to let off a drunken driver simply because he happened to be apprehended "on or near a private roadway instead of on a public street or highway," because no one can tell when such a befuddled driver "will leave the private road and pursue a mad, zigzagging course down a public highway with the resulting damage and horrors so frequently reported."

Based upon a 1948 Minnesota case.

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every family in America would own a car. We were going fast now.

"Of course he wasn't," Uncle Gavin said. "The lowly and invincible of the earth—to endure and endure and then endure, tomorrow and tomorrow and tomorrow. Of course he wasn't going to vote Bookwright free."

"I would have," I said. "I would have freed him. Because Buck Thorpe was bad. He——"

"No, you wouldn't," Uncle Gavin said. He gripped my knee with one hand even though we were going fast, the yellow light beam level on the yellow road, the bugs swirling down into the light beam and ballooning away. "It wasn't Buck Thorpe, the adult, the man. He would have shot that man as quick as Bookwright did, if he had been in Bookwright's place. It was because somewhere in that debased and brutalized flesh which Bookwright slew there still remained, not the spirit maybe, but at least the memory, of that little boy, that Jackson and Longstreet Fentry, even though the man the boy had become didn't know it, and only Fentry did. And you wouldn't have freed him either. Don't ever forget that. Never."

Harry Smith

continued from page 45

We're always looking for new health cookbooks. Graham Kerr's new books are great. The recipes are easy and the meals delicious.

Post: How do you feel about the women in media you work with (and, in your case, live with)? How have women progressed in this area in your experience?

Smith: I've been lucky. I've had a lot of women bosses through the years. I like working for women. There are still not enough women in management in most news organizations.

Post: Where do you want to be in 10 years or 20 years? What are your goals?

Smith: I don't know. I have a perfect job now, we have a three-year-old son—and would like to have more—and I'm home almost every day. Sure, I get called away. I went to the Persian Gulf for a month, and there are times when I've got to leave and cover a story. But on a day-to-day basis, I'm home a lot.

Post: Great.

Smith: So I see my son and play with him and read stories to him. Well, actually Andrea and I have a deal where we switch every night because that's one of the best times of the night. All calmed down, and we go to the bedroom and read our stories, and we tell stories.

Post: You walk to work?

Smith: Not at five in the morning. But there's a big part of me that says I will ultimately go back to the field full time. There's a part of me that has to see more and do more and go more places and write.

Post: Have you written any books?

Smith: No, no.

Post: But you will.

Smith: Everybody says that. Maybe one day I'll wake up. There are plenty of people who write that didn't begin until they were 50 or 60. Look at Norman McLean, *A River Runs Through It*. He didn't feel that he had the courage until he was close to retirement.

Post: You see so much life up here that you could write about.

Smith: Yes. But that's the reason I

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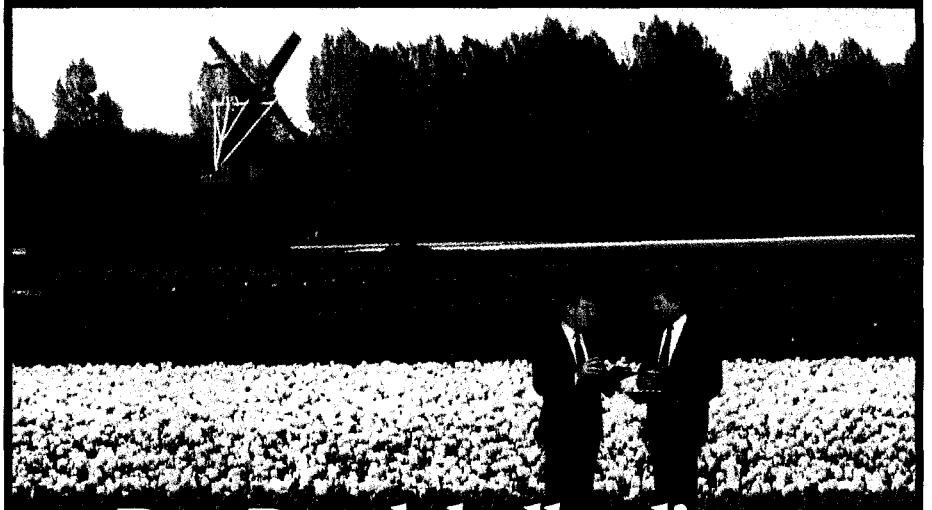
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was hired by CBS News. They liked my writing ability. They didn't say, gee, you've got a lot of hair.

On this light note, we reclaimed our coats and headed for the elevator, leaving our time-generous host free to return home to play with Jake.

But this being Tuesday, first he would stop off at 92nd Street, climb three flights of stairs, and sit on a little chair at a little desk in the hallway encouraging second-grade kids to read and make sentences.

Early Detection

continued from page 14

a pretty nerve-racking time for us.

"I was lucky," Kavenski admits. "Both scans were negative. I had the tumor removed, and the doctor believes he got it all. The tumor had reached the distal end of the prostate, but everything else was contained. That was in September. My first PSA was Dec. 1, and it was unreadable, less than .1. So, knock on wood.

"One of the scary things about this is I had no symptoms," Kavenski says. "OK, frequency of urination, urgency, but I've had that for 25 years. Absolutely no one's ever had that problem [prostate cancer] in my family until now. I felt good right up to the time it was discovered, and I feel great right now. It's hard to believe you have something inside you that's capable of killing you without having any symptoms."

Now, like Sen. Bob Dole, whose prostate cancer also was detected at a treatable stage, Kavenski has a missionary zeal to help prevent prostate cancer deaths. A recent Sunday morning found him "preaching" PSA testing to male choir members in the community room of the largest Presbyterian church in Indiana. He persuaded 46 men, including the minister, the Rev. Bill Enright, to be tested. A relatively young member of the congregation had recently died from prostate cancer, giving the church members an incentive for having the life-saving test.

Kavenski advises men to stay in shape. "I have been physically active for a long time but can't run anymore because of a football injury," he says. "I have a NordicTrac and a Nordic Chair, however, and I've used them every day of the week for the last three years. I jogged daily for 14 years prior to that. Being in good physical condition helped me tolerate the surgery very nicely. It helped me to get out of the hospital quicker. So, I recommend that everyone consider becoming active."

Kavenski received his second post-surgery PSA result in March. It was zero. "I guess you're never home free," he says, "but zero is what we want."

Breathless

continued from page 33

friends. Each day, as I progressed, a warm sense of their love enveloped and strengthened me. My surprised doctor ordered physical therapy to help me get back on my feet after months in bed. I was beginning to feel the benefits of it when I had a sudden reversal with another bronchial infection, which sent me back to the hospital.

A week of antibiotics bolstered me enough to send me back to my home hospital and a resumption of my therapy. However, I'm convinced that my principal "therapy" has been my faith that God is watching over me and has kept me in this world to accomplish something.

I don't know if restoration of my previous health (such as it was) is in His plans for me, but I've come to believe that at least one thing He kept me here for was to write this treatise on how to contract emphysema and thus provide a sure profit center for your hospital, physicians, and undertaker.

I really have been fortunate—my heart is still good, my blood pressure's excellent, and I didn't contract lung cancer. However, I'm on oxygen 24 hours a day and become breathless if I walk as little as three or four feet. I swallow about 30 pills and use a couple of inhalers and a nebulizing machine every day. And I'm one of the "lucky" ones who doesn't have to have a respirator machine breathing for me!

I have tried to inject some humor into this account; if I hadn't, I'd cry. It is heart-wrenching to see so many deaths occur because of smoking. It is truly tragic to see youngsters trying to achieve instant "cool" by emulating adult behavior with cigarettes.

My experience has given me just three words regarding smoking for the rest of the world: If you aren't a smoker, two of the words are for you: "Don't start!" If you are a smoker, the one word is "Quit!"

Epilogue

Of course this is all my fault, but I think I'll blame it on Ginger Rogers, the only redhead other than my wife I ever loved. If my fading memory serves,

The Perfect Squelch

John J. Williams, Republican senator from Delaware, found himself engaged in debate with a prominent Democratic senator from the Midwest farm belt. The Midwesterner objected that Williams was injecting "politics" into discussion of a bipartisan farm program and that he didn't know what he was talking about. He termed the Delaware senator's statements "absurd and ridiculous."

Williams then arose and held up a copy of the Congressional Record.

"What I did was to read a speech previously made in this Senate," Williams said. "If the senator wants to claim that that speech was dumb and displayed a lack of understanding, I want him to understand that he is speaking disparagingly of his own speech made last October."

—*Richard C. Palmer*

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she uttered the line "Cigarette me, baby!" to the lead in one of her non-Astaire movies ("Kitty Foyle," perhaps). The guy complied, and I guess I bought that first pack so I would be fully prepared in case she ever gave me the same command. She never did, of course, but if, by some fortunate quirk of fate, she should, I probably would go buy a pack. However, it would be for her. I wouldn't smoke one even for "old times' sake." If I hadn't started, I'd have more "old times" to look forward to right now!

Editor's note: A copy editor, Beth Wood Thomas, affixed this message: "From an emphysema victim, this is a wonderful article. Very reassuring and a great morale booster, which I desperately needed."

Potato Lovers

continued from page 22

over potatoes. Top with dollop of yogurt and sprinkle with cheese.

Per Serving (1 potato + ¾ cup chili mixture):
Calories: 361 Carbohydrate: 66.8 gm
Cholesterol: 4 mg Protein: 13.8 gm
Sodium: 258 mg Fat: 2.8 gm
Diabetic exchange: 4 bread + 1 vegetable + ½ fat

♥ ♥ ♥

South American Potato Platter

(Makes 6 servings)

Potatoes and Chicken:

6 cups low-sodium chicken broth
2 pounds (6 medium) potatoes, cut into 1-inch chunks
2 lemons, halved
1-2 fresh or canned jalapeño peppers, quartered lengthwise
1 tablespoon ground cumin
½ pound boned and skinned chicken breast halves
1 bunch cilantro

Salsa and Accompaniments:

2 cups diced tomatoes
¼ cup fresh or canned diced mild green chiles
1 tablespoon chopped cilantro
1 tablespoon white wine vinegar
¼ teaspoon pepper
1 red bell pepper, julienned
6 whole green onions

To prepare potatoes and chicken, in large saucepan or Dutch oven, combine low-sodium chicken broth, potatoes, lemons, jalapeño peppers, and cumin. Bring to boil, reduce heat, and simmer 8 minutes. Add boned and skinned chicken; simmer about 7 minutes longer until potatoes are *just* tender and chicken is cooked. Remove from heat; add cilantro to saucepan. Cool potatoes and chicken in broth 30 minutes.

Meanwhile, make salsa: In small bowl, combine tomatoes, chiles, cilantro, vinegar, and pepper. Drain potatoes and chicken, reserving 1 cup broth. To assemble, mound potatoes in center of large platter. Shred chicken and arrange on platter with remaining ingredients. Pour ½ cup broth over potatoes; serve remaining ½ cup broth in sauceboat. Serve immediately with salsa in bowl on side.

Per Serving (1 cup):
Calories: 224 Carbohydrate: 33.2 gm
Cholesterol: 27 mg Protein: 16.6 gm
Sodium: 132 mg Fat: 2.7 gm
Diabetic exchange: 2 bread + 1½ lean meat

♥ ♥ ♥

Potatoes Paprika

(Makes 4 servings)

4 medium potatoes (about 1¼ pounds)
3 teaspoons margarine
1 cup coarsely chopped onions
1 medium green bell pepper, seeded and cut into 1-inch squares
1 tablespoon paprika
1½ teaspoons caraway seeds
⅔ cup diced tomatoes
½ teaspoon pepper

Halve potatoes and cut into ½-inch wedges; combine in 2-quart microwave bowl with 2¼ cups water. Cover and microwave on high power just until tender, about 12 minutes. Meanwhile, melt margarine in large skillet. Add onions; sauté over medium heat 3 minutes. Add green pepper; sauté 3 minutes. Mix in paprika and caraway seeds. Drain potatoes and add to skillet with tomatoes. Toss gently until heated through. Season with pepper. Dollop each serving with nonfat sour cream, if you wish. Serve with grilled chicken.

Per Serving (¾ cup):
Calories: 133 Carbohydrate: 25.3 gm
Cholesterol: 0 mg Protein: 3.4 gm
Sodium: 129 mg Fat: 2.0 gm
Diabetic exchange: 1½ bread + ½ fat

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Chicken Nachos

(Makes 30 appetizers)

2 medium (about 1 pound) potatoes, cut into ¼-inch slices
⅛ teaspoon garlic powder

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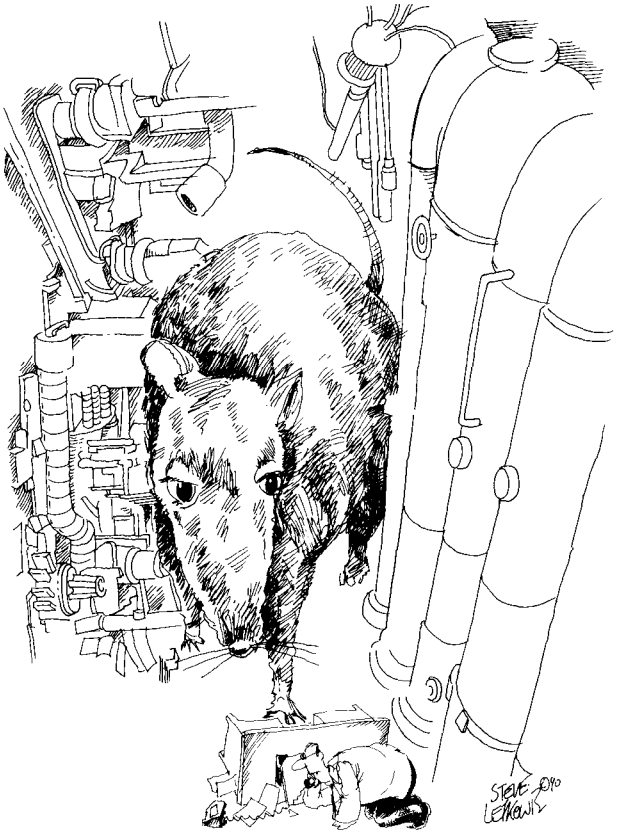
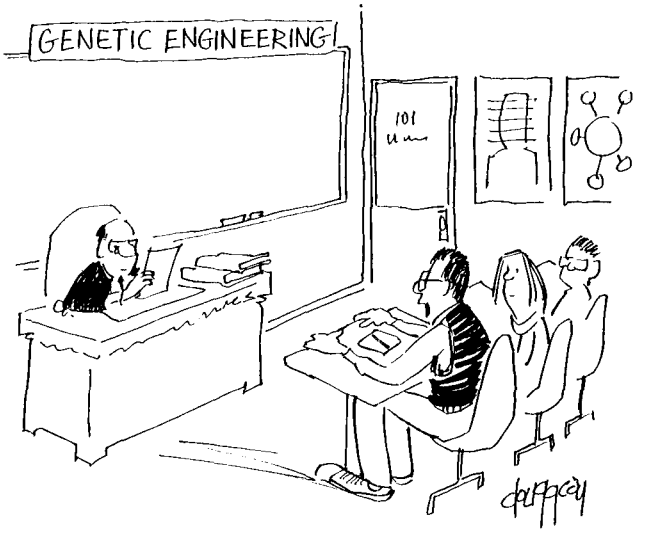
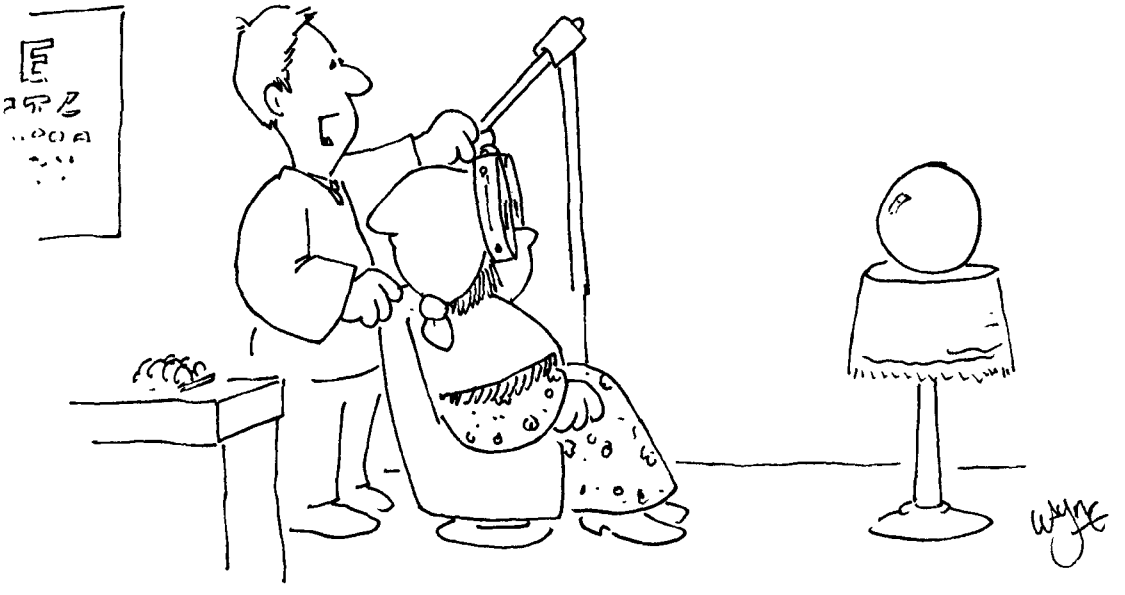


"Oh, nothing much. Listen, Sheldon, is your department still irradiating cats?"

"That was one of the strongest solar flares in some time."



"My homework ate my dog."



"Is the future clearer now or now?"

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6-7 oz. cooked chicken, flaked
3 tablespoons picante sauce
2 tablespoons minced green onions
¾ cup (3 oz.) shredded low-fat Mozzarella cheese
¼ cup sliced ripe olives, drained

Arrange potato slices on large microwave-safe platter; sprinkle with garlic powder. Cover with plastic wrap. Microwave on high for 4 to 5 minutes or until potatoes are tender, rotating dish once.

Combine chicken, picante sauce, and onions in medium bowl; stir well. Spoon 1 teaspoon of mixture onto each potato round. Sprinkle with cheese and top with an olive slice. Cover and microwave on high for 1 minute or until cheese is melted. Serve immediately.

Per Serving (1 appetizer):
Calories: 31 Carbohydrate: 2.1 gm
Cholesterol: 7 mg Protein: 3.0 gm
Sodium: 52 mg Fat: 1.1 gm
Diabetic exchange (3 appetizers): ½ bread + 1 lean meat

♥ ♥ ♥

Micro-Scalloped Potatoes
(Makes 6 servings)

1 teaspoon flour
¼ teaspoon coarsely ground pepper
1 tablespoon margarine
1 pound (3 medium) potatoes, peeled and sliced
¼ cup grated low-fat Swiss or Gruyere cheese
1 cup skim milk

In small bowl, combine flour and pepper. Grease a 1- to 2-quart casserole, using 1 teaspoon of margarine. Cover bottom of casserole with a layer of potatoes; sprinkle with flour mixture and dot with margarine. Repeat process until all potatoes are used. Sprinkle cheese on top layer; pour milk over potatoes. Microwave on high for 10 to 12 minutes, turning one-quarter, turn three times. Place under broiler until browned, 2 to 3 minutes.

Per Serving (½ cup):
Calories: 87 Carbohydrate: 12.9 gm
Cholesterol: 4 mg Protein: 4.4 gm
Sodium: 140 mg Fat: 2.0 gm
Diabetic exchange: 1 bread + ¼ medium fat meat

♥ ♥ ♥

Warm Broccoli-Potato Salad
(Makes 8 servings)

6 medium new potatoes (about 2 pounds), cut into 1-inch cubes
1½ to 2 cups fresh broccoli florets
¼ cup orange juice
1-2 tablespoons olive oil
3 tablespoons white wine vinegar
2 teaspoons basil
1 large clove garlic, minced
¼ teaspoon hot pepper sauce
2 tablespoons chopped parsley
2 green onions with tops, thinly sliced

Cook potatoes, covered, in 1 inch boiling water just until tender, 10 to 15 minutes. Drain; keep warm. Meanwhile, blanch broccoli in boiling water 1 minute. Drain and add to potatoes. In small saucepan, combine juice, oil, vinegar, basil, and garlic; bring to boil. Remove from heat. Stir in pepper sauce; pour over potatoes and broccoli. Add chopped parsley and green onions; toss to coat. Serve warm.

Per Serving (½ cup):
Calories: 114 Carbohydrate: 17.5 gm
Cholesterol: 0 mg Protein: 2.5 gm
Sodium: 9 mg Fat: 3.7 gm
Diabetic exchange: 1 bread + 1 fat

♥ ♥ ♥

Potato Corn Chowder
(Makes 8 servings)

4 medium potatoes (about 2 lb.), diced
1 onion, chopped
1 large rib celery, thinly sliced
1 red or green sweet bell pepper, chopped
1 jalapeño pepper, seeded and diced
¼ teaspoon ground tumeric (optional)
2½ cups low-sodium chicken broth
1 teaspoon cider vinegar
1 package (10 oz.) frozen whole kernel corn
1 cup skim milk
2 tablespoons cornstarch
1 cup shredded reduced-fat Cheddar cheese

In large saucepan, combine first eight ingredients. Bring to boil; then reduce heat and simmer, covered, 15 minutes. Stir together cornstarch and milk.

Add to chowder along with corn. Bring to boil, and boil one minute, stirring constantly. Serve chowder garnished with about 2 tablespoons of reduced-fat Cheddar cheese.

Per Serving (1 cup):
Calories: 177 Carbohydrate: 28.6 gm
Cholesterol: 11 mg Protein: 8.3 gm
Sodium: 128 mg Fat: 3.2 gm
Diabetic exchange: 2 bread + ½ fat

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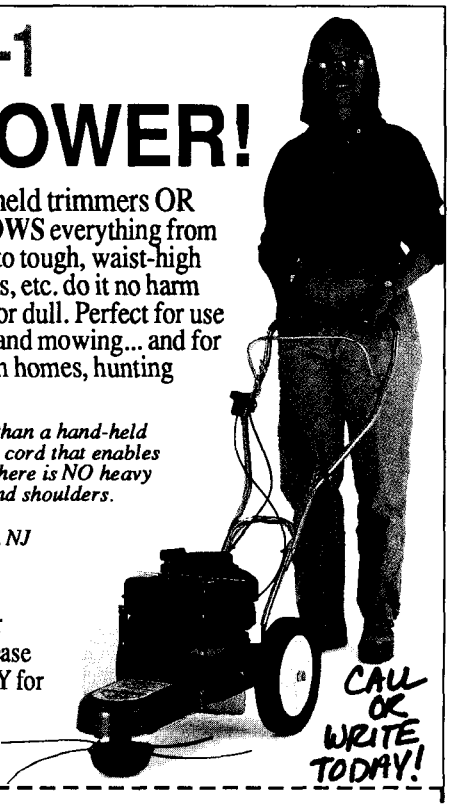

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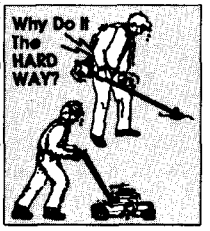
-Tom Lawrence, Somerville, NJ



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MEDICAL MAILBOX

by Cory SerVaas M.D.

"A wise man ought to realize that health is his most valuable possession."—*Hippocrates*

Hillary Clinton's Smoke-Free White House

Kudos to the First Lady who had the courage to ban cigarettes from the White House. With help from forward-thinking legislators, we hope she'll get a $10-per-pack tax on cigarettes. This would price them out of the market for our children, who are being addicted daily. We can't think of a more positive thing Hillary could do for the nation's health. Three thousand teenagers begin smoking every day. It is estimated that at least 1,100 Americans die from tobacco-caused deaths each day. If three or four jumbo jets crashed in the United States every day, we would shout for a remedy. Let's back Hillary to halt this travesty that is destroying our health care system.

We don't enforce our state laws to prevent tobacco sales to minors while we permit lethal cigarette ads to focus on and exploit our young.

Urge Hillary to propose a "benevolent" $10-per-pack tax on cigarettes so that poor children and less-educated adults who are vulnerable to the cigarette ads would mercifully be prevented from buying them.

How can we stand idly by while our kids are being addicted? Do your part. Please write to Hillary Rodham Clinton at the White House—we believe she'll listen.

Hillary Rodham Clinton poses under the portrait of Lincoln where past Presidents often sat at state dinners. Good news: There will be no after-dinner cigarettes in the White House dining rooms for four years.

Easing Woes for Rape Victims

Dear Dr. SerVaas:

Is it true that there is an after-rape pill that will keep a woman from becoming pregnant better than the D and C procedure?

My good friend was raped recently. She was taken to our hospital emergency room right away. What they did to her made her quite sick, and she was laid up for several days. I felt so sorry for her during the ordeal.

She's heard that there is an easier way to treat women after rape now. Is this true?

Louise Martin
Minneapolis, Minnesota

Yes, Louise, there is a pill for preventing pregnancy after rape, and I'm glad that you asked about it. But before I explain it to you, I must confess that I know little about gynecology and reproductive endocrinology. However, I have a lot of compassion for raped women.

My last experience with rape came when I was an extern at the Indiana University Medical Center. A friend, the wife of a candidate for the U.S. Senate, had been raped by a man who had broken into her house in the early morning hours and held her at knifepoint. Her rapist wore a mask, and she could identify him only as a very tall black man.

As testimony to her popularity in our city, the local newspapers and TV media were all mum on the unfortunate happening, even though her husband was in the midst of a hotly contested campaign for the Senate and she was a well-known celebrity in her own right. Out-of-town media were not as polite.

When I visited her on rounds at the hospital, she spoke with me privately about her concern. "Will people think any less of me? I feel disgraced!" Her husband visited her, but their five picture-book children couldn't visit her. Because she was in a teaching hospital, students and interns made rounds and wrote in her chart about her treatment.

This was in the 1960s. When a voluptuous girl would come to our general hospital pleading rape, a few young male interns would snicker, "Yeah, rape? I'll bet!" as though beauty went with sexual desire on the poor girl's part.

Now to answer your question, I interviewed a 1990s OB/GYN professor, Dr. Peggy Shepard. From her we learned: Yes, there is a pill that can be taken after rape, and, yes, it is far better than anything we have had to date. It doesn't make the victim sick, and only one pill is needed. It *can prevent the sperm from reaching the egg if taken soon enough*, and, yes, if taken in the first four to seven days, it can prevent the egg from implanting in the uterus, and in

"I remember when 'keeping up with the candidate' had something to do with rich food and late parties."

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95 percent of the cases can thus prevent pregnancy. This pill has no known side effects and has been proven safe when used by thousands of women in other countries.

But, no, a rape victim won't be given this pill in the United States at this time because it isn't available. The pill, mifepristone, also has another name, which is tainted.

Rape victims in the U.S. today are given medications that require more than one dose and often cause so much nausea that many women don't complete the course and therefore the treatment isn't successful. The drug that was initially used in the U.S. for postcoital contraception was one called diethylstilbestrol (DES). This is familiar to many people because it's been associated with cancer in young women who were exposed to it because it was prescribed for their mothers during pregnancy in the mistaken belief it would prevent miscarriages. Before it was known that DES would cause a pregnant woman to have a child with birth defects, it was prescribed as a morning-after pill or postcoital contraceptive for rape victims. Fortunately, the Physician's Desk Reference warns that DES should no longer be used as a postcoital contraceptive.

Mifepristone has no known side effects and in a large study was very well tolerated by women. A single dose of medication within 72 hours after intercourse was highly successful. If mifepristone becomes available in the U.S., it would be sold by prescription only and a rape victim could obtain it from her doctor or from an emergency room where she goes for treatment.

Dr. Peggy Shepard is a professor and chief of the Division of Reproductive Endocrinology at Indiana University Medical Center.

All I learned about rape victims ended in 1969. Dilation and curettage (D and C) was the standard procedure then. Dr. Shepard told me a D and C can't remove every bit of the receptive tissue from the lining of the uterus. She's seen a baby born nine months after the mother had a D and C.

Expect a Miracle

Infertile couples can be the most unhappy people in the world. Fertility doctors who see patients who want children but can't have them know how sad these couples can be. A woman has long been able to quietly obtain sperm from a donor and have the sperm mixed with her husband's so that no one, not even she, might know for sure whether the baby came from her husband's sperm or that of the donor. Just thickening up the ejaculate might have given her own husband's sperm the help it needed to travel up the Fallopian tube to penetrate the wall that surrounds the egg. Men have always been willing to provide their sperm. This is a worldwide phenomenon. We've talked to physicians in many countries who count in the hundreds children they have caused to be born by getting sperm donors for women whose marriages haven't produced babies.

Bill Wilson (right) gave his mother Elizabeth (left) a T-shirt to announce a happy surprise. A donor's egg, fertilized with his sperm in a test tube, was implanted into his wife Barbara's uterus. She's pregnant. They call it a miracle.

The obstetrician who delivers the baby doesn't necessarily know that his patient conceived with the help of a fertility specialist. So a husband can be a proud father without even a murmur that the sperm may not have been his.

Until recently, barren wives were less fortunate. We know one case where the wife was a very bright, well-adjusted, attractive woman with a very good position at a large firm and what appeared to be an ideal marriage—ideal except that they could produce no children. Their friends were shocked when they divorced and the husband went to South America, found a señorita, and promptly married her to produce the children he always wanted. The devastated wife remained childless and alone.

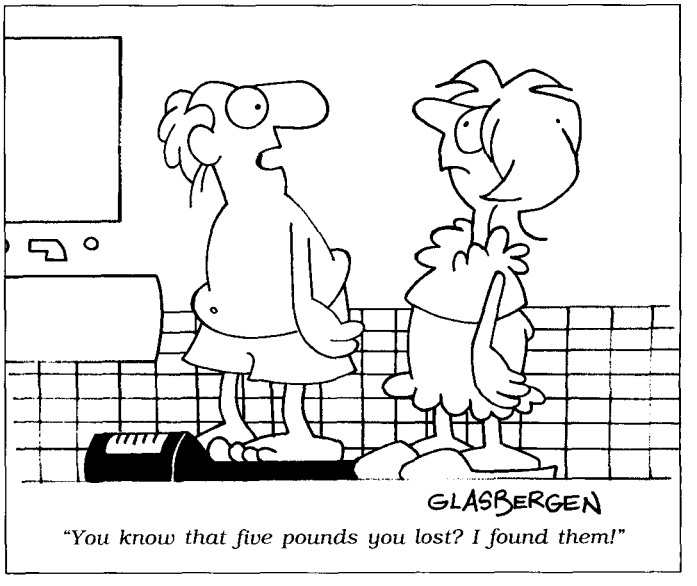
We think that a barren wife, who still has a uterus, would do well to look for a good egg to be fertilized by her husband's sperm in a laboratory and implanted.

The Four Stages of CHF

Dear Dr. SerVaas:

My grandfather was told he has CHF. What does this mean?

Marianne Watson
Los Angeles, California



"You know that five pounds you lost? I found them!"

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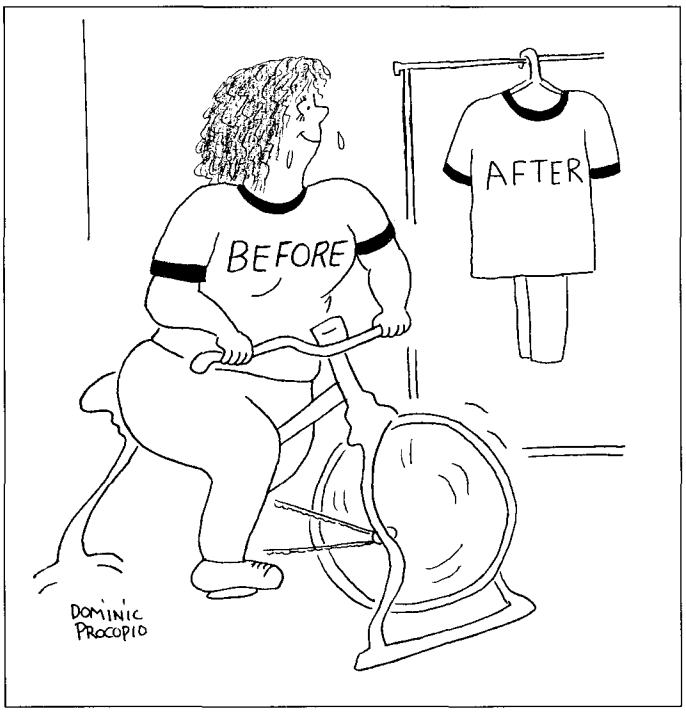

Your grandfather's CHF, or congestive heart failure, could be mild with no symptoms, moderate with some limitation of physical activity, severe, or even incapacitating. In CHF, there is a decrease in the heart's ability to pump enough blood to meet the body's needs.

Doctors at the New York Heart Association have classified the progression of CHF into four main categories as follows. By reading these, you could tell about where your grandfather's heart disease fits in.

Class I patients are functioning normally with cardiac disease, and ordinary physical activities do not result in undue fatigue, palpitation, dyspnea (shortness of breath), or chest pain.

Class II patients experience limitations of physical activity, are comfortable at rest, but ordinary physical activity results in fatigue, palpitation, dyspnea, or anginal pain.

Class III patients with cardiac disease experience a marked limitation of physical activities, remain comfortable at rest, but less than ordinary physical activity quickly fatigues them and they experience palpitation, dyspnea, or anginal pain.

Class IV patients are unable to carry on any physical activity without discomfort. Symptoms of cardiac insufficiency or anginal syndrome may be present even at rest. Any physical activity results in discomfort.

Treatment varies but often relies upon a multidrug regimen that combines different therapeutic agents to achieve the best possible results. Diet also becomes a focus of control. Limiting salt intake is the rule.

Treatments for CHF have a long and colorful history.

As early as the 13th century, foxglove was used by the Welsh. The Chinese treated the disease with *ch'an su*, the dried skin of the common toad. These substances are cardiac glycosides, agents that reduce heart rate while increasing the force of its contraction. Until the 1960s, cardiac glycosides, known as digitalis, were the primary recommended oral therapy for CHF.

Diuretics became popular in the '60s and have been the routine treatment for the majority of patients with mild-to-moderate heart failure. Diuretics act on the kidneys to increase the flow of urine, which helps the body excrete excess fluid, reducing pressure in the heart, and relieving pulmonary and systemic congestion.

Correction of arrhythmias with magnesium is also helpful. Physicians can do a great deal to help CHF patients, and new drugs are on the horizon.

Speaking Dilemma

Dear Dr. SerVaas:

My problem is that I spray people when I talk. It is so bad that I am withdrawing, turning my head, or just hardly opening my mouth when I talk. Do you have a solution? We love our *Saturday Evening Post.*

Dorothy Keeling
Louisville, Kentucky

Four Stages of the Failing Heart

New York Heart Association Classification of Congestive Heart Failure

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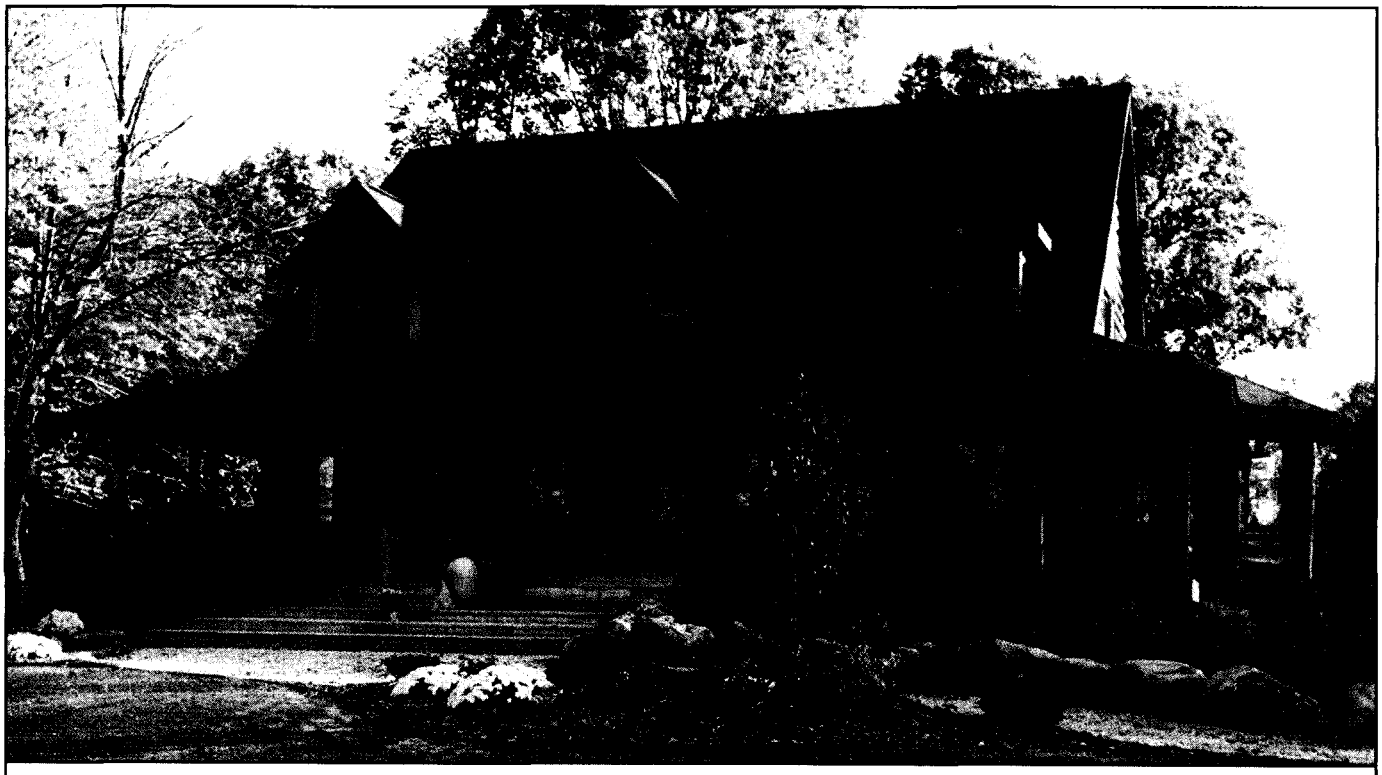

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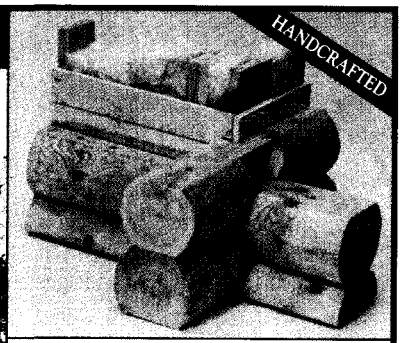

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Spraying is not an uncommon problem, but of course it varies in severity. We spoke with Dr. Charles Diggs at the American Speech/Language Hearing Association. Dr. Diggs offered several suggestions for this reader. The first suggestion is to try more frequent swallowing before talking to clear excessive saliva from the oral cavity. Second, he said, speak with less force.

If this reader makes lighter contact, not pressing the lips as tightly together, she will still make the sound, but she won't have as much force to propel the saliva forward.

If these suggestions don't work, Dr. Diggs said, it's possible she may have a clinically significant swallowing problem. If she needs help, she should contact a local speech/language pathologist. The American Speech/Hearing Association can give a referral in her area. The toll-free number is 1-800-638-8255.

A Bitter Taste in the Mouth

Dear Dr. SerVaas:

I've enjoyed listening to you on television for many years and now enjoy your "Medical Mailbox" in *The Saturday Evening Post.*

Your advice is practical and many times relates to us.

I have a problem for which my internist has no answer.

I was diagnosed with an overactive thyroid through a blood test on Feb. 1. My doctor prescribed Propylthiouracil, two 50 mg tablets, three times a day. One week later she increased it to three tablets, 50 mg, three times a day. Immediately, I lost my sense of taste. I only had a very bitter, salty mouth and tongue. I ceased using the medication more than one and a half weeks ago but never did regain my sense of taste. I, of course, am very worried. I am losing weight because trying to eat nauseates me.

Is there anything that can be done to regain my sense of taste? Will it ever come back?

I have had Addison's disease since 1976 and take hydrocortisone every day. Would this have anything to do with my mouth taste?

"Even when we were *that young, we weren't* that *young!"*

My most recent blood test showed that my thyroid is normal now.

Vera Schmidt
Antioch, California

In the April 1983 issue of *The Saturday Evening Post*, we published an article about Adolph Coniglio who had a problem of "no taste and weight loss." He was helped by Dr. Robert Henkin, whom he referred to in this article as a "god." Dr. Henkin had solved his problem by prescribing 440 milligrams a day of oral zinc sulfate. Because Dr. Henkin is an authority on patients with loss of taste, we consulted with him to help advise you, and he said the following:

Ten years ago Adolph Coniglio, who couldn't taste, was cured with 440 mg of zinc sulfate a day. He remains on zinc to this day.

"You have hyperthyroidism for which you took the anti-thyroid, Propylthiouracil. After taking this drug, you developed two different symptoms: one, loss of taste, and two, the salty/bitter phantom taste.

"It's difficult to be certain about what caused these symptoms, for there are two possibilities. One is related to the antithyroid effect of the drug, which can produce an underactive thyroid gland (i.e. hypothyroidism). This can cause taste loss and a phantom taste.

"The other relates to side effects of the drug itself, which can cause these same symptoms. If you are hypothyroid, then taking replacement hormones will restore your taste function and diminish your phantom taste. If the cause is a side effect of the drug, an evaluation of your current biochemical status may be necessary to understand how this drug affected your body biochemically.

"Treatment would be related to restoration of your previously normal status. All of this is complicated by your Addison's disease and your current dose of replacement steroids. Since these hormones also influence your taste function, you should consult your local doctor. If she has any questions, she may contact me, Dr. Robert Henkin, at the Taste and Smell Clinic, 5125 MacArthur Blvd., Washington, DC 20016."

The subject of the *Post*'s April 1983 article, Adolph Coniglio, suffered from a taste disorder called hypogeusia. Many doctors thought Mr. Coniglio's trouble was psychosomatic. Dr. Henkin proved them all wrong. He believes loss of taste is probably just as historical an affliction as loss of sight or hearing. "We don't know much about it because it's only just been recognized. It is an immensely complicated problem," Dr. Henkin said. "We're beginning to get somewhere. I think zinc sulfate is therapeutic. It works, not always, less often than we would like, but often enough to prove its worth.

"As a group, victims of hypogeusia are measurably deficient in zinc. A number of conditions can bring about hypogeusia. We know it can happen in pregnancy, perhaps because a portion of the mother's zinc is transferred to the baby. We know it can be brought on by a head injury. We

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know it occurs in cancer patients. About 10 percent of the patients we've studied who were found to have hypogeusia later have been found to have cancer.

"Hypogeusia and its related disorders occur in a variety of infectious diseases. Hepatitis is one. Flu is another.

"About half the people in whom we have confirmed a loss of taste and distortion of taste and smell developed the disorder after an attack of the flu.

"Another group of our patients developed aberrations of taste and smell after a surgical procedure. I don't know why. Maybe stress is a factor. And then we have a group of patients whose hypogeusia is truly idiopathic. We can't find any precipitating insult. I think we will in time, possibly in the area of nutrition.

"A team of pediatricians at the University of Colorado Medical Center in Denver has reported some interesting findings. They examined a group of 132 boys and girls ages four to 16. Zinc concentrations were normal for all but nine of the group. Seven of the nine were found to be below normal in both height and weight, and they also reported poor appetites. They were then tested for taste acuity. All were found to be suffering from hypogeusia. They were treated with oral zinc sulfate. Normal taste acuity returned.

"Other studies here and elsewhere have confirmed our convictions that zinc can be a crucial factor. One of our studies involved a group of normal volunteers. We biochemically depleted their bodies' zinc. We used an essential amino acid called L-histidine, which has the power to strip zinc from its binding proteins and cause it to be excreted through the urine.

"The immediate effect of depletion was appetite loss followed by a loss of taste and smell. Distortions of taste and smell then appeared. Oral zinc therapy reversed the condition, even in the face of continued administration of L-histidine. Once more, zinc emerged as a major marker for normal taste acuity."

The entire article can be read in the April 1983 *Post*.

"It's contagious, isn't it?"

Odor Problems

Dear Dr. SerVaas:

I'm writing about a problem that my daughter has, and I hope that you or your network of resources can come up with a solution.

My daughter is an active, health-conscious 23-year-old college student who has body odor. The type of odor I'm talking about does not come from being unclean. She bathes daily, and it's not from failing to wear a deodorant when doing heavy exercise. Although she does sweat profusely and has a strong odor as a result of exercise, this can be tolerated and managed. What I'm talking about is a heavy, musky odor that seems to come out of her pores, all over her body. As I said, she bathes daily, sometimes more than once a day, has healthy habits, knows the benefits of drinking plenty of water and eats very well-balanced meals (saying she doesn't feel well in the long run if she tries to skimp on nutrition). She is not overweight, is very fit, and conscientious about exercising. We're very close, but I haven't been able to bring myself to discuss this with her.

This problem, I think, is becoming an embarrassment to her. For example, her sister won't take back a T-shirt that she borrowed for only a couple of hours until it has been washed because of this heavy, musky odor that clings to it. Her bedding, which she changes weekly, has a strong odor.

She'll soon be in the working world, and I surely don't want this to affect her relations in the workforce. I know from my own experience that I tend to stay away from those who don't smell pleasant, and I think of them as unclean in their personal habits.

I would prefer a personal response to this letter, but if you think there would be enough people who would benefit from your response, this letter could be used without my name. I would never do anything to embarrass this wonderful daughter who is intelligent and caring. I've heard of people drinking aloe to "cleanse their systems" or taking garlic pills—could these be the solution? If you do not have an answer to this problem, could you guide me in another direction? I would very much appreciate any help you could give.

Name and hometown withheld

A musky odor on one mother's children led to the discovery of PKU's cause. In 1934, a mother in Oslo, Norway, commented to a relative, who was a chemist, that her children's diapers had an odd smell. The chemist analyzed the urine and eventually discovered that the children had an "inborn error of metabolism" called PKU. The odor came from an inability to metabolize the amino acid phenylalanine, and restricting protein from the children's diets eliminated their odor.

You may have noticed instructions on foods containing aspartame, the artificial sweetener sold under the name NutraSweet, that read "Phenylketonurics: Contains Phenylalanine." People with PKU cannot eat any product with aspartame. Both NutraSweet and Equal contain phenylalanine.

It is conceivable that your daughter might be a carrier for a metabolic disorder, as yet undescribed, that is causing the musky odor. We would recommend a consultation with an endocrinologist.

An internist we know in West Palm Beach, Florida, is

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very interested in bizarre afflictions caused by food additives or allergies to commonly harmless products. His name is Dr. H. J. Roberts.

Some colostomy patients take Colo-Fresh or Odor Gone tablets to avoid odor. We have acquaintances who take these tablets when they go out socially to avoid odor from flatus. The tablets contain bismuth subgallate.

The bismuth binds with the odor-causing sulfur in the digestive tract, and renders it odorless. I'm not sure that these products would help your daughter, but they might be worth a try.

She might be helped by consuming more complex carbohydrates and less protein.

If we hear from readers who have had problems similar to your daughter's, we will forward their letters to you, marked personal and confidential. We're withholding your name and hometown to avoid embarrassing your daughter.

Guillain-Barré Syndrome

Dear Dr. SerVaas:

My son, 29, recently told me that he and "Amy" are an official couple now.

For six years he's been dating and doing things with an established group of friends. I am glad that he has found someone to share his life.

The problem is this: Amy has been diagnosed with Guillain-Barré syndrome. She had been told that it is incurable. Is there any hope for her? Any new medical advances? Surely you can understand my concern. I would appreciate any information that could help her. This mother's heart would like to spare him some of the potential pain if they should marry. I do not, however, get involved in his decisions.

Thanks for listening. You were the first resource that came to mind. *The Saturday Evening Post* is an excellent magazine. We greatly appreciate it.

Bernice Denison
Kent, Washington

Guillain-Barré syndrome is characterized by muscular weakness and mild sensory loss. Although the cause is unknown, usually the syndrome begins shortly after a person experiences an infection, surgery, or an immunization.

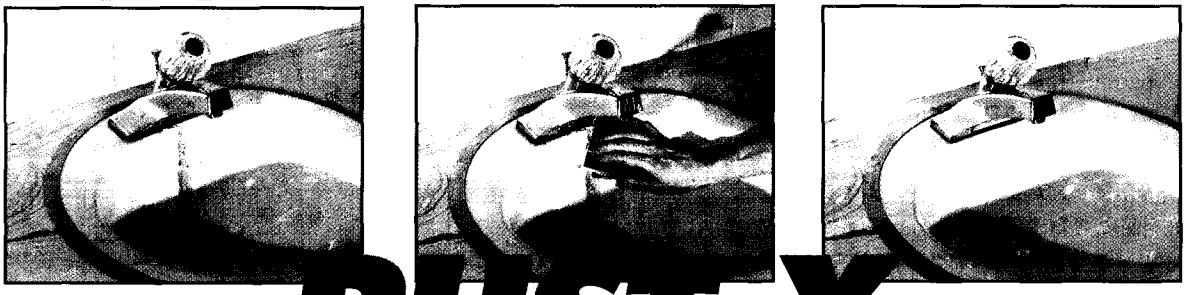
Weakness usually begins in the legs and progresses to the arms. Ninety percent of patients reach their worst state of the syndrome in the second or third week after symptoms start.

Some patients may have symptoms of unsteadiness in walking and severe loss of tactile sensation. About 10 percent of patients relapse after initial improvement and enter a chronic state. However, the patient normally experiences considerable improvement over a period of months.

Convalescence may last for months or several years and should include physical therapy. Although 30 percent of adults with the syndrome still have residual weakness that may require retraining, use of orthopedic appliances, or operations, most make an almost complete recovery.

For more information about Guillain-Barré syndrome please see the six-page story beginning on page 46.

RUST PROBLEM?



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Money Talk

continued from page 38

in the hundreds of thousands or even millions of dollars, can be avoided, a business saved, and the livelihood of succeeding family members preserved through the process of estate planning.

One method of transferring a family business from one generation to the next while minimizing gift and estate taxes involves the gifting of closely held company stock shares over a period of years. The greatest advantage of this strategy is the ability to "discount" the value of the company stock for gift tax purposes when less than a majority interest is transferred. Based upon the element of control, a minority interest is worth comparatively less than a controlling interest in the same company. By transferring minority interests in company stock each year, the transferor could, for example, reduce the value of his company's stock from $50 to $35 per share, based on a 30 percent discount.

There are countless examples of owners of closely held businesses taking advantage of the minority discount. In one instance a parent owned 100 percent of his family business. For business and tax-planning purposes, the parent transferred a 20 percent interest in the company to each of his five children. To reduce the gift tax consequences and to recognize the true value of a 20 percent minority interest in a company, the parent discounted the value of each share his children received.

Assuming the value of the entire enterprise was $2 million, the gift tax for a transfer to children without a minority discount would be about $267,000. By using a 35 percent discount, the annual exclusion, and the combined unified credit of both parents, the gift tax due could be reduced to $0, for a current tax savings of $267,000!

The long-term impact of a discounted stock value is a reduction of the transferor's taxable gifts, and, consequently, the gift and estate taxes he or she will owe ultimately. Naturally, this concept does not set well with the IRS. The service has for years fought, unsuccessfully, the taking of discounts for minority-interest transfers between family members.

The IRS long believed that transfers of family-controlled company stock among family members should be viewed in light of the family's overall *controlling* interest. From the IRS's perspective, the transfer was not of a distinguishable minority interest but rather part of a larger controlling interest. The IRS believes that family members are likely to act in unison regarding the family business. The underlying synergism of the family in the IRS's mind led to the reasoning that any family-held interest in a family-controlled company constituted a majority interest by association.

"Could we please get through one dinner party without the jokes about my memory?"

Many families across the United States serve as examples of how misguided this line of reasoning is. Countless family-controlled companies either have fallen apart, been sold, or instituted specific internal management controls because of the family's inability to reach a consensus about operating the business. There are no guarantees a family will act in unison when the family business is passed to the next generation. In many cases, family members negotiate with each other from a tougher position than they might with an unrelated party.

Not only was the IRS's position misguided, but it also discriminated against the institutions that comprise the American dream: the family business. Why should a parent be forced to transfer his or her company stock to a child at a higher value than he or she could obtain from a total stranger? An unrelated person would never pay more than a discount value for a minority interest in a closely held company. Why should the IRS arbitrarily expect more from a family member?

Fortunately, the IRS recently has come to accept a more rational position on the subject. In a recent ruling (Rev. Rul. 93-12), the IRS did not disallow a claimed minority discount when a parent transferred 20 percent of his stock to each of his five children. This represented the IRS's acceptance of the view argued by private tax professionals and maintained by most courts. What is important is the IRS's formal recognition of the minority discount for transfers of closely held stock among family members.

It is critically important that owners of closely held family businesses obtain appropriate counsel from their accountants, estate planning attorneys, and personal financial advisers. These professionals can offer advice on the appropriateness of a minority discount, the level of discount warranted under the particular facts and circumstances, and how the transfer ought to be structured. Through careful planning, high gift and estate taxes can be minimized for the owners of closely held companies.

"Why Don't You Hug Me?"

continued from page 51

like 250 patients (*Neurology*, August 1985, volume 35, pages 1096-1104). They found definite improvement among patients who received plasmapheresis. But you have to start it early in the course."

"Aren't you surprised by how fast she's progressing?"

"Yes, I am. GBS usually progresses over a few days or weeks, rarely over a few hours. I've seen one other patient progress this fast. And there are some cases like this in the literature. Cooper sure knew what he was doing

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Doctor Tips on Chest Pain and Clogged Arteries

(SPECIAL FEATURE)–If you regularly have chest pain, ringing ears or even leg pain ...your arteries may be clogged...and you may be on your way to a heart attack or stroke. A remarkable health guide by Dr. Edwin Flatto is now available that reveals a medically tested method that can stimulate your arteries to cleanse themselves–the natural way–without drugs or surgery.

It's called "Cleanse Your Arteries & Save Your Life." And it shows you exactly how nature can activate your body's built-in artery cleansing mechanism once you stop eating the wrong foods. It also warns you of the potential danger of certain so-called "cholesterol" diets.

Your own doctor will tell you that partially blocked arteries can produce many of the following symptoms. And he'll also agree that many of these symptoms may be improved once circulation is enhanced and the cleansing process begins. "Cleanse Your Arteries & Save Your Life" is based on documented scientific principles that can help:

- **Reduce chest pain (angina)**
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- **Lower the incidence of heart disease**
- **Reduce dizziness & loss of balance**
- **Improve a partial loss of hearing**
- **Help clear up ringing in the ears**
- **Help clear up leg pain, cramps or tiredness in the legs**
- **Stimulate your body to produce a natural substance that seems to protect against heart attack**
- **Make your body dispose of cholesterol**
- **Thin out sludgy, poor circulating blood**
- **Reduce blood triglyceride levels**
- **Lower high blood pressure naturally**

By following Dr. Flatto's advice you can feel better than you have in years. You'll learn which delicious foods to eat and which to avoid. And you'll probably have more energy than you know what to do with. Here's just a small sample of the useful and helpful information you'll find in this valuable aid to better health:

- **When women run higher risks for heart attacks**
- **Which vitamins seem to offer protection against heart disease**
- **Which popular health foods may be dangerous**
- **The real truth about chelation therapy**
- **The real truth about Omega-3 fish oils**
- **The real truth about polyunsaturated fats**
- **How to calm your nerves naturally**
- **What simple food helps you lose weight**
- **Relieve gas and constipation naturally**

Right now, as part of a special introductory offer, you can receive a special press run of "Cleanse Your Arteries & Save Your Life" by Edwin Flatto, M.D. for only $8.95 plus $1 postage and handling. It is not available in any bookstore. It is only available through this special offer. Your satisfaction is 100% guaranteed. If you are dissatisfied in any way, simply return it in 90 days for a full refund–no questions asked.

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by putting her in ICU."

Dr. McAllister called the plasmapheresis service. The physician in charge agreed with the plan and arranged for technicians to begin the procedure that same evening.

They didn't get a chance. As Dr. McAllister was hanging up the phone, an alarm went off in Mrs. Benedict's room. We ran in. Her pulse was 160, and she was very short of breath.

"Dr. Martin!" she gasped.

I was shocked by the change. Neck muscles contracted with each breath, and her skin was mottled and blue. Her speech was short, interrupted, gasping.

"What's . . . the matter? . . . What's happening to me? . . . Why can't I . . . breathe?"

Paralysis had ascended so rapidly that her diaphragm, the major breathing muscle that sits between the abdomen and chest, was now totally paralyzed. She was breathing only with "backup" neck muscles, and those were about to fail.

I spoke quickly to the nurse. "Please hand me the Ambu bag. And call anesthesia. She needs to be intubated right away!" I began manual Ambu ventilation with 100 percent oxygen through a tight-fitting face mask. This would keep her going until we could get her intubated.

"Just breathe through this mask, Mrs. Benedict. You'll be fine," I reassured her.

Patients who can't breathe because of *lung* disease usually flail their arms and move their chest cage rapidly in and out. Mrs. Benedict did not have lung failure; her lungs, the organs of respiration inside the chest cage, were normal. Her respiratory muscles had failed, and she could not expand her chest. There was *no* movement of her chest (except when some air was pushed in by my squeezing the Ambu bag). Without artificial breathing assistance, she would die.

The anesthesiologist came right away and intubated her with a foot-long ¼-inch-wide plastic tube; one end of the tube stuck out from her mouth, and the other end disappeared inside her throat. With the tube in place we had a secure airway, and as soon as we connected the tube to the ventilator she "pinked up." The ventilator—replete with alarms and constantly monitored by technicians—was now her life support.

A quick physical exam uncovered no permanent damage. Blood pressure, heart rate, and skin perfusion were all reasonable. But what a close call! My patient had almost died, and I felt certain *she* knew it.

I checked an arterial blood gas, which was adequate, then called Dr. Cooper and Mr. Benedict. Both men said the same thing: "I'll be right down."

(continued next issue)

Test Credits

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Where Do You Think You Are?

(answers from page 84)

(Theme: Towns named Clinton)

1. Clinton, CT	2. Clinton, MI	3. Clinton, NE
4. Clinton, AR	5. Clinton, ME	6. Clinton, LA
7. Clinton, IN	8. Clinton, OK	9. Clinton, MT

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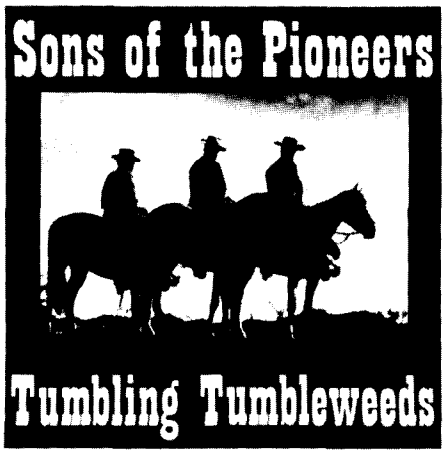

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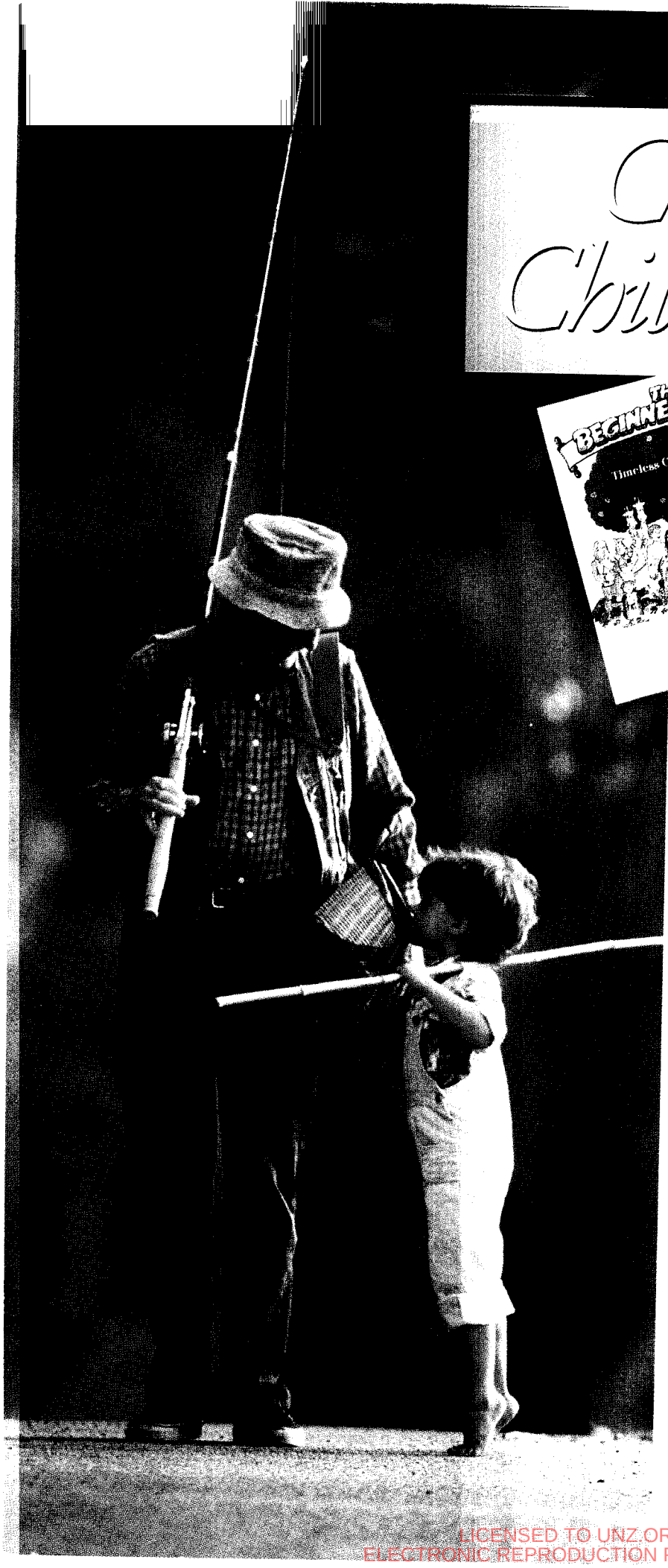
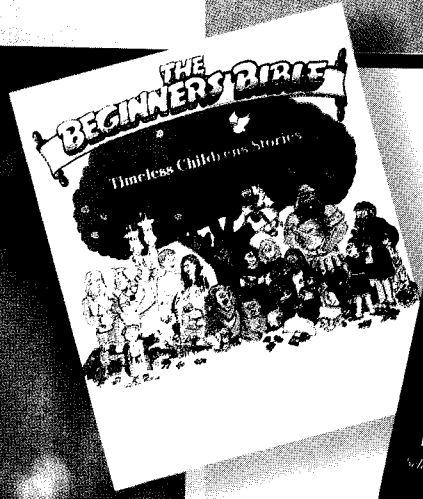
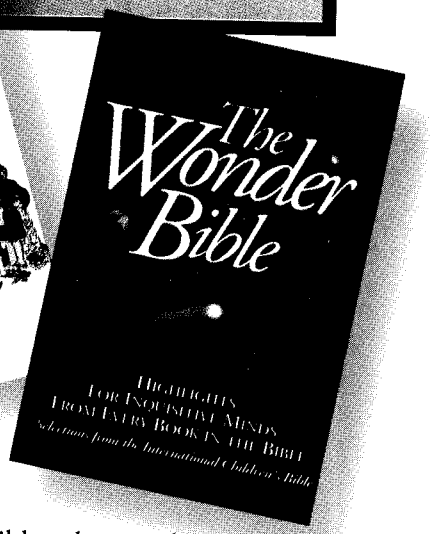


Catch a Child's Heart

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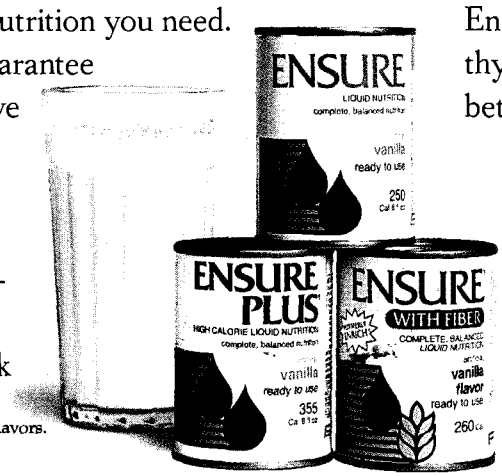

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